Drug Claims

Output Field: 1PROVID   1byte PROVID

Definition: First byte of PROVID, indicating whether the provider was found in the DataScan Provider Table. This field is only available in DataScan.

DB2 Name: N/A	**Type:** Medi-Cal Custom Field	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 1	**Storage Length:** 1

Input Fields:

Field Name	Data Type	Length
PROVID	CHARACTER	13

Logic: This field represents the first byte of the PROVID field, which indicates whether the ID was successfully tagged from the provider table. This is a DataScan user defined field.

FOLOG Calls:

Default:

Precedents: None

Impact:

Tech. Notes: This is a DataScan user defined field.

Revisions:

Date	Author(s)	Phase	IR(s)	Description
9/7/1999	RVJ/TRP	5	N/A	Added user defined field.

Drug Claims

Output Field: 3_PROVBL   3_PROVIDBL

Definition: 1st 3 Bytes of PROVIDBL. This field is only available in DataScan.

DB2 Name: N/A	**Type:** Medi-Cal Custom Field	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 3	**Storage Length:** 3

Input Fields:

Field Name	Data Type	Length
PROVIDBL	CHAR	9

Logic: This field represents the first 3 characters of the PROVIDBL field and is a user defined field in DataScan. This field indicates the type of provider or facility.

FOLOG Calls:

Default:

Precedents: None

Impact:

Tech. Notes: This is a user defined field available only in DataScan

Revisions:

Date	Author(s)	Phase	IR(s)	Description
9/7/1999	RVJ/TRP	5	N/A	Added user defined field

Drug Claims

Output Field:	**ADJIND**	ADJIND

Definition: An indication of an adjustment and the type of adjustment.

DB2 Name: ADJ_IND	Type: Medi-Cal Custom Field	Missing Value: Zero
Data Type: DECIMAL	Display Length: 1, 0	Storage Length: 1

Input Fields:	Field Name	Data Type	Length
	F35-ADJUSTMENT-INDICATOR	X	1

Logic: ADJIND = 1 (negative adjustment) when F35-ADJUSTMENT-INDICATOR is any of these values:

2 Negative Supplemental
3 Refund to Medi-Cal (negative only)
5 Negative side of a Void & ReIssue

ADJIND = 2 (positive adjustment) when F35-ADJUSTMENT-INDICATOR is any of these values:

1 Positive Supplemental
4 Positive side of Void & Re-Issue

FOLOG Calls: None

Default: Zero (missing value). This is assigned when the input value is not 1 - 5.

Precedents: None

Impact: Panorama View: this field is on the Drug Extract and is used throughout the logic to accurately calculate payments and unique services. Therefore, new values for ADJIND may require a change in Panorama View.

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	1/5/1999	J. Dittman	4	739	Added impact to PV.
	6/8/1998	L Richardson	3	556	Removed 6-Cash Disposition no longer a valid value
	5/18/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field:	**ADJUDDT**	Adjudication

Definition: The 35-File ADJUDICATION DATE as reported on the claim or encounter. If nothing is reported, the date is set to match the date the database was updated with this record. On paid claims this identifies the date the claim was approved for payment.

DB2 Name: ADJUDICATION_DATE	Type: Medi-Cal Custom Field	Missing Value: 0001-01-01
Data Type: DATE	Display Length: 10	Storage Length: 4

Input Fields:	Field Name	Data Type	Length
	F35-ADJUDICATION-DATE	S9	8
	TAPEDT	SMALLINT	4

Logic: Set ADJUDDT = F35-ADJUDICATION-DATE, if a valid date.
If F35-ADJUDICATION-DATE not a valid date, set ADJUDDT = TAPEDT.

FOLOG Calls: OPR-#35: When F35-ADJUDICATION-DATE is not numeric (call FOLOG with F35-ADJUDICATION-DATE)

OPR-#35: When F35-ADJUDICATION-DATE is an invalid date (call FOLOG with F35-ADJUDICATION-DATE)

Default: The CCYYMMDD equivalent of TAPEDT.

Precedents: TAPEDT.

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	8/6/1999	L. Richardson	5	1237	Changed the input field length to 8, removed 'not- Y2K' compliant references, and removed logic that set the century '19'.
	1/8/1999	C.Swanson	4	1203	Update FOLOG with operation number and diplayed field
	1/7/1999	T. Poyner	4	1210	Changed date format from YYYYMMDD to CCYYMMDD logic and default.
	12/29/1998	L. Richardson	4	1203	Moved all the TAPEDT related rules to the Logic section, clarified the Default, and added Y2K issue to Tech Notes.
	6/2/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field: **AGE**	Age	

Definition: The patient/eligible/recipient age in years on the date of service. AGE equals service date (SVCDATE) minus birth date (BIRTHDT) truncated to a whole year. In Eligibility, age is calculated as of the month of eligibility. In Episodes, age is calculated as the eligible's age at the end of the Episode.

DB2 Name: AGE_AMT		**Type:** DataScan Core Field	**Missing Value**: Null
Data Type: DECIMAL	**Display Length:** 3, 0		**Storage Length:** 2

Input Fields:

Field Name		Data Type	Length
BIRTHDT		DATE	4
SVCDATE		DATE	4

Logic: The basic calculation is: When BIRTHDT is not missing (equal to '0001-01-01'), calculate AGE as SVCDATE - BIRTHDT (truncated to whole year), otherwise set AGE to missing (NULL).

Overrides: There are two override conditions:

1. If AGE calculates greater than 125, recalculate AGE as AGE - 100. This assumes that virtually nobody lives to 125, so the BIRTHDT century was probably wrong.

2. If BIRTHDT is greater than SVCDATE, set AGE to zero when the SVCDATE is less than 1 year before BIRTHDT. Otherwise, set AGE to missing (NULL) when the SVCDATE is more than 1 year before BIRTHDT.

Note: The NEWBORN logic could potentially reconvert the AGE = 0, if the Claim meets the criteria for NEWBORN.

FOLOG Calls: OPR-#44: When AGE is missing (call FOLOG with BIRTHDT)

OPR-#:2: When calculated AGE is greater than 125 (call FOLOG using BIRTHDT)

Default:

Precedents: SVCDATE, BIRTHDT

Impact:

The maximum allowable age was changed to 125 to be consistent with all the DataScan tales and Core logic.

And a provision for the occurrence of Birth date > Service date is added to be consistent with the way PMW handles this condition. If PMW does not handle this condition then fatal build errors will occur in PMW.

Tech. Notes: The NULL indicator field for AGE is set to '-' when logic indicates that AGE = NULL.

Revisions:

Date	Author(s)	Phase	IR(s)	Description
1/22/1999	L. Richardson	4	1203	Added tech note to identify the NULL indicator.
1/22/1999	K. Key	4	1203	Clarified logic regarding overrides and difference between SVCDATE and BIRTHDT.
1/8/1999	C.Swanson	4	1203	Updated FOLOG, added operation number and diplayed field
10/13/1998	L Richardson	3	1060	New logic to provide for condition of birthdate > service dat
10/12/1998	L Richardson	3	1054	Changed the maximum allowable age from 150 to 125 to be consistent with all DataScan tables.

Drug Claims

Output Field:	**AIDCODE**	Aid Code	

Definition: The Aid Code of the Medi-Cal eligible. On services this represents the aid code reported on the claim or encounter. For population and eligibility counts, this represents the first aid code for which the eligible is certified (otherwise, AIDCODE represents the first valid).

DB2 Name:	AID_CODE	**Type:**	Medi-Cal Custom Field	**Missing Value:**	Spaces
Data Type:	CHARACTER	**Display Length:** 2		**Storage Length:** 2	

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-BID-AID-CODE	X	2

Logic: The following rules are followed in order and will assign both AIDCODE and ELIGCAT:

1. Validate F35-BID-AID-CODE in the ELIGCAT map by matching on:

   F35-BID-AID-CODE and ELIGCAT Aid Code, when a match is found

   set AIDCODE = F35-BID-AID-CODE and
   set ELIGCAT = ELIGCAT from map

2. If a no match is found between F35-BID-AID-CODE and ELIGCAT Aid Code and F35-BID-AID-CODE <> spaces.

   set AIDCODE = 00 (two zeros, not the missing value) and
   set ELIGCAT = ELIGCAT from map using AIDCODE '00'

3. If F35-BID-AID-CODE = spaces:

   set AIDCODE = spaces or low values (missing), and
   set ELIGCAT = spaces or low values (missing)

FOLOG Calls: OPR-#22: When F35-BID-AID-CODE is not found on the ELIGCAT map (call FOLOG with F35-BID-AID-CODE)

OPR-#22: When F35-BID-AID-CODE is equal to a space or a low value (call FOLOG with F35-BID-AID-CODE)

Default: Spaces (missing value). This is assigned when F35-BID-AID-CODE = spaces or low values.

Precedents: None

Impact: AIDCODE is used to set ELIGCAT which is a Panorama View dimension (Aid Category) so we want to distinguish invalid input values (99-Other Invalid) from no input value (missing).

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/8/1999	C.Swanson	4	1203	Updated FOLOG, added operation number and diplayed field
	12/23/1998	L. Richardson	4	1203	Moved the ELIGCAT spec logic in with the AIDCODE logic
	6/2/1998	L. Macklem	3	739	Rewrote as functional spec. In so doing, simplified input field from F35-BENE-ID (bytes 3 - 4).
	12/31/1997	J. Dittman	2	474, 554	Validate input value before moving.

Drug Claims

Output Field:	**ALERTCON**	Alert Con

Definition: Identifies the Type of utilization conflict detected or the reason for the pharmacist's professional service.

DB2 Name:	ALERT_CONFLICT	**Type:**	Medi-Cal Custom Field	**Missing Value:**	Spaces
Data Type:	CHARACTER	**Display Length:** 2		**Storage Length:** 2	

Input Fields:

Field Name	Data Type	Length
F35-DUR-CONFLICT-ALERT	CHARACTER	2

Logic: If F35-DUR-CONFLICT-ALERT is spaces or low values, set ALERTCON to spaces (missing).
Otherwise map ALERTCON with F35-DUR-CONFLICT-ALERT using the ALERTCON map.
If no match is found on the map, set ALERTCON to space (missing).

FOLOG Calls: OPR #XX: If no match is found on the ALERTCON map (call FOLOG using F35-DUR-CONFLICT-ALERT).

Default: Space

Precedents: None

Impact:

Tech. Notes:

Revisions:

Date	Author(s)	Phase	IR(s)	Description
5/8/2002	C.Swanson	6	2811	Created field

Drug Claims

Output Field: **ALERTINT**	Alert Inter		

Definition: Identifies the pharmacist intervention when a conflict code has been identified or service has been rendered.

DB2 Name: ALERT_INTERVENTION	**Type:** Medi-Cal Custom Field		**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 2		**Storage Length:** 2

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-INTERVENTION-ALERT	CHARACTER	2

Logic: If F35-INTERVENTION-ALERT is spaces or low values, set ALERTINT to space (missing).
Otherwise, map ALERTINT with F35-INTERVENTION-ALERT using the ALERTINT map.
If no match is found on the map, set ALERTINT to space (missing).

FOLOG Calls: OPR #XX: When no match is found on the ALERTINT map (call FOLOG using F35-INTERVENTION-ALERT).

Default: Space

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	5/8/2002	C.Swanson	6	2811	Created field

Drug Claims

Output Field: ALERTOUT   Alert Out

Definition: Identifies the action taken by a pharmacist in response to a conflict or the result of a pharmacist's professional service.

DB2 Name: ALERT_OUTCOME   **Type:** Medi-Cal Custom Field   **Missing Value:** Spaces

Data Type: CHARACTER   **Display Length:** 2   **Storage Length:** 2

Input Fields:

Field Name	Data Type	Length
F35-OUTCOME-ALERT	CHARACTER	2

Logic: If F35-OUTCOME-ALERT is spaces or low values, set ALERTOUT to space (missing).
Otherwise, map ALERTOUT with F35-OUTCOME-ALERT using the ALERTOUT map.
If no match is found on the map, set ALERTOUT to space (missing).

FOLOG Calls: OPR #XX: When no match is found on the ALERTOUT map (call FOLOG using F35-OUTCOME-ALERT)

Default: Space

Precedents: None

Impact:

Tech. Notes:

Revisions:

Date	Author(s)	Phase	IR(s)	Description
5/8/2002	C.Swanson	6	2811	Created field

Drug Claims

Output Field: **APPLIND**   Appl Ind

Definition: A flag that determines the status of records in the service and case tables.

DB2 Name: APPL_IND	**Type:** DataScan Core Field	**Missing Value:** None
Data Type: CHARACTER	**Display Length:** 1	**Storage Length:** 1

Input Fields:

Field Name	Data Type	Length
N/A	N/A	N/A

Logic: DATASCAN CORE LOGIC:

Installation: In a new database, APPLIND = Y for all Drug records.

Update: APPLIND is used to keep track of new records and records which will be deleted. New records are added before old records are deleted. This facilitates a roll back of an update if problems are found during pre-release testing.

When the database has been updated, but the history rolloff process has not yet occurred, APPLIND values signify:

   Y - Rows which will be retained because they are in both the old and new 30-month windows
   N - Rows added by the current update

When the database has been updated but not yet rolled off, the data managers can access a view that contains both Y and N APPLIND values (the new 30-month window), while end users continue to access only Y APPLIND values (the "unchanged" or "old" database). This allows the data managers to test the update and, if necessary, initiate a roll back without affecting the end-users' view of the data.

FOLOG Calls: None

Default: None. The update process maintains this field, which cannot be missing.

Precedents: None

Impact: APPLIND is used by DataScan only. It is not visible to the user.

Tech. Notes:

Revisions:

Date	Author(s)	Phase	IR(s)	Description
2/19/2002	T. Meeker	6	N/A	Removed references to "D" because there is no APPLIND value of "D" on the Drug table.
12/8/1998	K. Key	4	N/A	In order to match the EGAD table, modified the missing rule be none instead of spaces and modified the core column indicator to be core instead of custom.
5/18/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field: **AWP**	AWP			

Definition: The average wholesale price (AWP) charged by wholesalers for the specific drug. This is the calculated results of mulitplying the METQTY times the UNITPRC.

DB2 Name: AVG_WHOLESALE	**Type:** Medi-Cal Custom Field	**Missing Value** None
Data Type: DECIMAL	**Display Length:** 13, 5	**Storage Length:** 7

Input Fields:	**Field Name**	**Data Type**	**Length**
	N/A	N/A	N/A

Logic: Drug Convert Logic:

Sets AWP to zero.

DATASCAN CORE LOGIC:

AWP is set to the Average-Wholesale-Price found in the Redbook File when the NDC is found
The Drug/Edit/Insert will multiply the AWP from Redbook by METQTY to calculate the AWP.

If NDC is not found in the Redbook File, then AWP remains 0 (zero)

FOLOG Calls: None

Default: Zero

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	8/4/1999	L. Richardson	5	823	Changed MediSpan reference to Redbook.
	1/23/1999	L. Richardson	4	1203	Converted to Functional Spec and added the default of zero.

Drug Claims

Output Field:	**BASISCOS**	Basis-Cost			

Definition: Indicates whether or not Disproportionate Share/Public Health Service was present.

DB2 Name: BASIS_OF_COST		**Type:** Medi-Cal Custom Field		**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 2			**Storage Length:** 2

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-DRUG-BASIS-OF-COST-DETERM	CHARACTER	2

Logic: Set to F35-DRUG-BASIS-OF-COST-DETERM when = Space, 00 or 08.
Otherwise set to space (missing).

NOTE: The input value of 09 is mapped to 08 on the 35-File.

FOLOG Calls: OPR #XX: When F35-DRUG-BASIS-OF-COST-DETERM not equal to space, 00 or 08. Call FOLOG using F35-DRUG-BASIS-OF-COST-DETERM.

Default: Space

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	5/8/2002	C.Swanson	6	2811	Created field

Drug Claims

Output Field: BIRTHDT   Birth Date

Definition: The eligible/recipient's date of birth in CCYY-MM-DD format.

DB2 Name: BIRTH_DT   **Type:** Medi-Cal Custom Field   **Missing Value:** 0001-01-01

Data Type: DATE   **Display Length:** 10   **Storage Length:** 4

Input Fields:

Field Name	Data Type	Length
F35-BIRTHDATE	X	8
F35-CIN	X	9
MBE-ENROLLDT	DATE	4
MBR-BIRTHDT	DATE	10
MBR-EMPID	X	9
NEWBORN	X	1
SVCDATE	DATE	10

Logic: If the claim is not a Newborn Claim, in other words if NEWBORN = 'N'

Look up BIRTHDT in (tag from) Eligibility, matching on:

F35-CIN = MBR-EMPID
SVCDATE = MBR-ENROLLDT (match on year and month only)

When a match is found, move MBR-BIRTHDT to BIRTHDT,
    if no match is found, set BIRTHDT to 0001-01-01 (the missing value).

Note: Tagging logic is further described in the Background Document section of the Drug Table specifications.

If the claim is a Newborn Claim, NEWBORN = 'Y'

Set BIRTHDT = F35-BIRTHDATE.

FOLOG Calls: OPR-#38: When NEWBORN = 'N'and an Elig-Match is found and resulting BIRTHDT is missing after comparing it to the Eligibility Table (call FOLOG with BIRTHDT) or if NEWBORN= 'Y' and F35-Birth-Date is missing (call FOLOG with F35-Birth-Date).

Default: Jan. 1, 1 (0001-01-01, the missing value). This is assigned if F35-BIRTHDATE is not a valid date or is future to the end of the database window, and the tag from Eligibility fails.

Precedents: SVCDATE, NEWBORN

Impact: This field is found on the Panorama View Eligibility Extract.

Tech. Notes: Y2K compliant.

Revisions:

Date	Author(s)	Phase	IR(s)	Description
8/12/1999	L Richardson	5	1247	Changed the logic to Tag from Elig unless a NEWBORN.
8/6/1999	L. Richardson	5	1237	Changed the input f35-birthdt length to 8, removed specs fo single digit century conversion.
1/8/1999	C.Swanson	4	1203	Updated FOLOG, added operation number and diplayed field
1/7/1999	T. Poyner	4	1210	Changed date format from YYYYMMDD to CCYYMMDD description.

Drug Claims

Output Field: BIRTHDT   Birth Date

Date	Name			Description
12/28/1998	L. Richardson	4	1203	Clarified the century conversion and the tagging logic.
6/2/1998	L. Macklem	3	739	Rewrote as functional spec.
1/14/1998	L. Richardson	2	672	Made logic consistent with Claim and the program implementation.
1/10/1998	J. Dittman	4	739	Added impact to PV.
12/15/1997	L. Richardson	2	507	Added logic to consider birthdate invalid if future to the database's window.

Drug Claims

Output Field:	**CAPIND**	Encountr Ind

Definition: Identifies managed care services which were capitated.

DB2 Name: CAP_IND	**Type**: Req'd for Mgd Care Rptg	**Missing Value**: Spaces
Data Type: CHARACTER	**Display Length**: 1	**Storage Length**: 1

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-PLAN-CODE	X	2

Logic: CAPIND = Y when F35-PLAN-CODE is *either* of the following:

    02 - Managed Care Encounter
    04 - COHS

FOLOG Calls: OPR-#19: When F35-PLAN-CODE is equal to '2' (Managed Care Encounter) or '4' (COHS) (call FOLOG with F35-PLAN-CODE)

Default: Spaces (missing value). This is assigned if F35-PLAN-CODE <> 2 or 4.

Precedents: None

Impact: CAPIND can be used as a subsetting/filter criterion to select only capitated (CAPIND = Y) or only fee-for-service (CAPIND = ' '/missing) services.

Panorama View: CAPIND is used to set the Completion Type field in the extract, as encounters and claims have different Completion Factor Tables.

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	5/9/2002	C.Swanson	6	2811	Changed input field length to 2
	1/8/1999	C.Swanson	4	1203	Updated FOLOG, added operation number and diplayed field
	1/4/1999	J. Dittman	4	739	Added impact to PV.
	6/2/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field: **CASENUM**	Case Number	

Definition: The last 10 characters of the beneficiary identification number. The first 7 bytes are encrypted.

DB2 Name: CASE_NUMBER	**Type:** Medi-Cal Custom Field	**Missing Value**: Spaces
Data Type: CHARACTER	**Display Length:** 10	**Storage Length:** 10

Input Fields:	Field Name	Data Type	Length
	F35-CIN	X	9
	MBR-CASENUM	X	10
	MBR-EMPID	X	9
	MBR-ENROLLDT	DATE	10
	SVCDATE	DATE	10

Logic: Tag from Eligibility or set to missing, as follows:

Look up CASENUM (tag from) the Eligibility Table, matching on *both*:

F35-CIN = MBR-EMPID
SVCDATE = MBR-ENROLLDT (match on year and month only)

When a match is found, set CASENUM = MBR-CASENUM.
NOTE: The first 7 bytes of this field are encrypted.

If no Elig-Match is found, set CASENUM = spaces (missing).

FOLOG Calls: OPR-#21: When F35-BENE-ID (bytes 5-14) is equal to zeroes, 9's, or low-values (call FOLOG withF35-BENE-ID) ** Remove this FOLOG call, since the F35-BENE-ID is no longer used to set this field. ** 8/13/99 (LDR)

Default: Spaces (missing value), when no Elig-Match is found.

Precedents: SVCDATE

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	11/29/2000	C.Swanson	6	1921	Added note to logic about the first 7 bytes of this field are encrypted.
	8/13/1999	L Richardson	5	1247	Changed the logic to only tag from Elig or set to missing. Removed FOLOG call OPR# 21.
	1/8/1999	C.Swanson	4	1203	Updated FOLOG, added operation number and diplayed field
	12/26/1998	L. Richardson	4	1203	Converted to Functional Spec.
	6/2/1998	L. Macklem	3	739	Rewrote as functional spec. In so doing, clarified input field from F35-BENE-ID (bytes 5 - 14).

Drug Claims

Output Field:	**CAUSEAA**	Rl Cause AA	

Definition: Related Causes information. Indicates an accompanying auto accident as the cause of the illness or injury. Use in conjunction with CAUSEAP, CAUSEEM and CAUSEOA.

DB2 Name:	RL_CAUSE_IND_AA	**Type:**	Medi-Cal Custom Field	**Missing Value:**	None
Data Type:	CHARACTER	**Display Length:**	1	**Storage Length:**	1

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-RELATED-CAUSE-CODE	CHARACTER	6

Logic: The F35-RELATED-CAUSE-CODE is a 6 byte field with up to three codes with 2 character per code. This field is used specifically to indicate an auto accident was the cause of the illness or injury. Each possible 2 character code must be interrogated for the value of 'AA'.

If F35-RELATED-CAUSE-CODE[1,2] = 'AA' or F35-RELATED-CAUSE-CODE[3,2] = 'AA' or F35-RELATED-CAUSE-CODE[5,2] = 'AA' then set CAUSEAA = 'Y'
Otherwise set CAUSEAA = 'N'

FOLOG Calls:

Default: N

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	6/6/2002	C.Swanson	6	2811	Changed field from RLCAUSE1 and made it an indicator field

Drug Claims

Output Field: CAUSEAP   Rl Cause AP

Definition: Related Causes information. Indicates another party as the cause of the illness or injury. Use in conjunction with CAUSEAA, CAUSEEM and CAUSEOA.

DB2 Name: RL_CAUSE_IND_AP   **Type:** Medi-Cal Custom Field   **Missing Value:** Spaces

Data Type: CHARACTER   **Display Length:** 1   **Storage Length:** 1

Input Fields:	Field Name	Data Type	Length
	F35-RELATED-CAUSE-CODE	CHARACTER	6

Logic: The F35-RELATED-CAUSE-CODE is a 6 byte field with up to three codes with 2 character per code.   This field is used specifically to indicate an another party was the cause of the illness or injury. Each possible 2 character code must be interrogated for the value of 'AP'.

If F35-RELATED-CAUSE-CODE[1,2] = 'AP' or F35-RELATED-CAUSE-CODE[3,2] = 'AP' or F35-RELATED-CAUSE-CODE[5,2] = 'AP' then set CAUSEAP = 'Y'
Otherwise set CAUSEAP = 'N'

FOLOG Calls:

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	6/6/2002	C.Swanson	6	2811	Changed field from RLCAUSE2 and made it an indicator field

Drug Claims

Output Field:	**CAUSEEM**	Rl Cause EM	

Definition: Related Causes information. Indicates employment as the cause of the illness or injury. Use in conjunction with CAUSEAA, CAUSEAP and CAUSEOA.

DB2 Name: RL_CAUSE_IND_EM		**Type:** Medi-Cal Custom Field	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 1		**Storage Length:** 1

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-RELATED-CAUSE-CODE	CHARACTER	6

Logic: The F35-RELATED-CAUSE-CODE is a 6 byte field with up to three codes with 2 character per code. This field is used specifically to indicate employment was the cause of the illness or injury. Each possible 2 character code must be interrogated for the value of 'EM'.

If F35-RELATED-CAUSE-CODE[1,2] = 'EM' or F35-RELATED-CAUSE-CODE[3,2] = 'EM' or F35-RELATED-CAUSE-CODE[5,2] = 'EM' then set CAUSEEM = 'Y'
Otherwise set CAUSEEM = 'N'

FOLOG Calls:

Default: N

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	6/6/2002	C.Swanson	6	2811	Changed field from RLCAUSE3 and made it an indicator field

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Drug Claims

Output Field: CAUSEOA   Rl Cause OA

Definition: Related Causes information. Indicates another accident as the cause of the illness or injury. Use in conjunction with CAUSEAA, CAUSEAP and CAUSEEM.

DB2 Name: RL_CAUSE_IND_OA   **Type:** Medi-Cal Custom Field   **Missing Value:** Spaces

Data Type: CHARACTER   **Display Length:** 1   **Storage Length:** 1

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-RELATED-CAUSE-CODE	CHARACTER	6

Logic: The F35-RELATED-CAUSE-CODE is a 6 byte field with up to three codes with 2 character per code.   This field is used specifically to indicate that an other accident was the cause of the illness or injury. Each possible 2 character code must be interrogated for the value of 'OA'.

If F35-RELATED-CAUSE-CODE[1,2] = 'OA' or F35-RELATED-CAUSE-CODE[3,2] = 'OA' or F35-RELATED-CAUSE-CODE[5,2] = 'OA' then set CAUSEOA = 'Y'
Otherwise set CAUSEOA = 'N'

FOLOG Calls:

Default: N

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	6/6/2002	C.Swanson	6	2811	Created field

Drug Claims

Output Field:	**CCSGHPP**	CCS/GHPP Ind

Definition: A value which indicates if the claim or encounter represents an authorized California Children's Services / Genetically Handicapped Person's Program service.

DB2 Name:	CCS_GHPP_IND	Type:	Medi-Cal Custom Field	Missing Value: Spaces
Data Type:	CHARACTER	Display Length: 1		Storage Length: 1

Input Fields:	Field Name	Data Type	Length
	F35-CCS	X	1

Logic: CCSGHPP = 1 when F35-CCS = 1.

FOLOG Calls: None

Default: Space (missing value). This is assigned when F35-CCS is anything other than 1.

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	6/2/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field: CHG   Charge

Definition: All charges for services which are covered under the plan provisions.

DB2 Name: CHG_AMT   **Type:** Medi-Cal Custom Field   **Missing Value:** None

Data Type: DECIMAL   **Display Length:** 9, 2   **Storage Length:** 5

Input Fields:	Field Name	Data Type	Length
	F35-DET-MEDI-CAL-AMOUNT-BILLED	S9(7)V9(2)	9

Logic:

Set CHG = F35-DET-MEDI-CAL-AMOUNT-BILLED (if numeric)

When F35-DET-MEDI-CAL-AMOUNT-BILLED not numeric set CHG = 0 (zero)

FOLOG Calls: OPR-#46: When F35-DET-MEDI-CAL-AMOUNT-BILLED is not numeric (call FOLOG with the count)

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	1/24/1999	L. Richardson	4	1203	Converted to functional spec.
	1/8/1999	C.Swanson	4	1203	Updated FOLOG, added operation number and diplayed field
	12/8/1998	K. Key	4	N/A	In order to match the EGAD table, modified the core column indicator to be custom instead of core.

Drug Claims

Output Field: CLMNBR   Clm Nbr

Definition: The ICN (Internal Control Number) from the 35-File uniquely identifies each claim as assigned by the processor of the claim.

DB2 Name: CLM_NBR   **Type:** Medi-Cal Custom Field   **Missing Value:** Zero

Data Type: DECIMAL   **Display Length:** 13, 0   **Storage Length:** 7

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-CCN	S9	13

Logic: CLMNBR = F35-CCN (if numeric). If F35-CCN not numeric set CLMNBR to zero (missing).

FOLOG Calls: None

Default: Zero (missing value). This is the value assigned if F35-CCN is non-numeric.

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	6/3/2002	C.Swanson	6	2811	Changed input field name to F35-CCN from F35-ICN
	12/28/1998	L. Richardson	4	1203	Removed 'and <>0' from the logic and 'or zero' from the Default.
	5/28/1998	L. Richardson	3	583	Chg to numeric from Char - fixed with Data Scan 4.0
	5/14/1998	L. Macklem	3	739	Rewrote as function spec. In so doing, clarified that F35-ICI must be numeric.
	1/14/1998	L. Richardson	2	496	Changed CLMNBR to character from numeric, and changed the default from zero to spaces accordingly.

Drug Claims

Output Field: **CLMTYPE**	Claim Type

Definition: The 35-File field CLAIM TYPE on drug and medical service records. Assigned '9' for Capitation Payment records.

DB2 Name: CLAIM_TYPE		**Type:** Medi-Cal Custom Field		**Missing Value:** Spaces	
Data Type: CHARACTER		**Display Length:** 1		**Storage Length:** 1	

Input Fields:

Field Name	Data Type	Length
F35-CLAIM-TYPE	X	1

Logic: CLMTYPE = F35-CLAIM-TYPE (if valid).

Valid values for the input data are 1 - 6.

FOLOG Calls: OPR-#39: When the F35-CLAIM-TYPE is not a valid value (call FOLOG with F35-CLAIM-TYPE)

Default: Space (missing value). This is assigned if F35-CLAIM-TYPE is any value other than 1 through 6.

Precedents: None

Impact: Panorama View: this field is found on the Drug Extract for future use in the system.

Tech. Notes:

Revisions:

Date	Author(s)	Phase	IR(s)	Description
1/10/1999	J. Dittman	4	739	Added impact to PV.
1/8/1999	C.Swanson	4	1203	Updated FOLOG, added operation number and diplayed field
6/3/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field:	**CMPNDIND**	Cmpnd Ind

Definition: Indicates whether or not the prescription is for a compound drug.

DB2 Name:	CMPD_IND	Type:	Medi-Cal Custom Field	Missing Value:	Spaces
Data Type:	CHARACTER	Display Length:	1	Storage Length:	1

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-COMPOUND-CODE	CHARACTER	1

Logic: If F35-COMPOUND-CODE = 2, set CMPNDIND = 'Y'.
Otherwise set to 'N'

NOTE:
F35-COMPOUND-CODE = 0 (compound drug not specified)
F35-COMPOUND-CODE = 1 (not a compound drug)

FOLOG Calls: OPR #XX: When F35-COMPOUND-CODE not equal to 0, 1 or 2 (call FOLOG using F35-COMPOUND-CODE)

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	7/11/2002	C.Swanson	6	2811	Corrected DB2 name
	5/8/2002	C.Swanson	6	2811	Created field

Drug Claims

Output Field:	**COB**	COB

Definition: The amount of the submitted charge saved due to the integration of Third Party Liability, such as the liability of commercial insurance or Medicare. This amount will be zero for capitated service encounters.

DB2 Name: COB_AMT	**Type:** Medi-Cal Custom Field	**Missing Value**: None
Data Type: DECIMAL	**Display Length:** 9, 2	**Storage Length:** 5

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-MEDICARE-AMOUNT-PAID	S9(7)V9(2)	9
	F35-OTHER-COVERAGE-AMOUNT	S9(7)V9(2)	9
	F35-SEGMENT-COUNT	S9(04)	2

Logic: COB is comprised of both F35-Medicare-Amount-Paid and F35-Other-Coverage-Amount fields. On the input file, the F35-Medicare-Amount-Paid is on the detail segments, while the F35-Other-Coverage-Amount is found only on the header record. Therefore, we use the F35-Medicare-Amount-Paid in the calculation of COB only when we are processing F35-SEGMENT-COUNT = 1. The logic rules follow:

> When F35-SEGMENT-COUNT = 1
> Calculate COB = F35-MEDICARE-AMOUNT-PAID + F35-OTHER-COVERAGE-AMOUNT

Note - There is an override that must be considered while setting the COB for F35-SEGMENT-COUNT=1: It is possible (though highly unlikely) that the sum where F35-SEGMENT-COUNT = 1 could exceed the DataScan field size of +/-9,999,999. If the calculated sum is outside the limits, COB is reset to +/-9,999,999.

> When F35-SEGMENT-COUNT <> 1
> Calculate COB = F35-MEDICARE-AMOUNT-PAID

FOLOG Calls: OPR-#47: When F35-SEGMENT-COUNT equals 1 and F35-MEDICARE-AMOUNT-PAID and F35-OTHER-COVERAGE-AMOUNT are both numeric and the calculated COB is not between 9,999,999.00 and -9,999,999.00 (call FOLOG with F35-MEDICARE-AMOUNT-PAID)

OPR-#47: When F35-SEGMENT-COUNT equals 1 and F35-MEDICARE-AMOUNT-PAID and F35-OTHER-COVERAGE-AMOUNT are not numeric (call FOLOG with F35-MEDICARE-AMOUNT-PAID)

OPR-#47: When F35-SEGMENT-COUNT does not equal 1 and F35-MEDICARE-PAID-AMOUNT is not numeric (call FOLOG with F35-MEDICARE-AMOUNT-PAID)

Default: Zero (there is no missing value). This is the value used if the input field (either field where LINENUM = 1) is non-numeric.

Precedents: LINENUM.

Impact: Like CHG, COPAY, DEDUCT and PAY (but *not* NETPAY), COB is not set to 0 for capitated services. As a result, both COB and PAY (=NETPAY + COB + COPAY + DEDUCT) will be overstated in some reports/queries. To prevent this, the user should include only rows where CAPIND = missing (space).

Tech. Notes: It is possible (though highly unlikely) that the sum where LINENUM = 1 could exceed the DataScan field size of +/-9,999,999. The program checks for this. If the sum is outside the limits, it is reset to +/-9,999,999.

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	5/8/2002	C.Swanson	6	2811	Changed input from LINENUM to F35-SEGMENT-COUNT
	1/8/1999	C.Swanson	4	1203	Updated FOLOG, added operation number and diplayed field
	12/28/1998	L. Richardson	4	1203	Converted to Functional Spec.

Drug Claims

Output Field: COB   COB

	12/8/1998	K. Key	4	N/A	In order to match the EGAD table, modified the core column indicator to be custom instead of core.

Drug Claims

Output Field: CODE1	Code1 Rest

Definition: A code that identifies drugs that have a Code 1 restriction.

DB2 Name: CODE1_IND	**Type:** Medi-Cal Custom Field	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 1	**Storage Length:** 1

Input Fields: Field Name	Data Type	Length
F35-PRICE-RESTRICTION	X	1

Logic: When F35-PRICE-RESTRICTION = '1' set CODE1 = 1.

When F35-PRICE-RESTRICTION <> '1' set CODE1 = Spaces.

FOLOG Calls: None

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions: Date	Author(s)	Phase	IR(s)	Description
1/24/1999	L. Richardson	4	1203	Converted to functional spec.

Drug Claims

Output Field: COHORT   Cohort

Definition: A value identifying the eligible's age and gender cohort.

DB2 Name: COHORT_TYP   **Type:** DataScan Core Field   **Missing Value:** 13

Data Type: SMALLINT   **Display Length:** 5   **Storage Length:** 2

Input Fields:	Field Name	Data Type	Length
	N/A	N/A	N/A

Logic: Drug Convert Logic:

Sets COHORT to 13.

DataScan CORE Logic:

Sets COHORT to the COHORT assignment found in the MEDSTAT COHORT Table based on a match of AGE and SEX. When the AGE and SEX values are matched, the following valid values will be assigned:

1 - Males, age 0 - 17
2 - Males, age 18 - 34
3 - Males, age 35 - 44
4 - Males, age 45 - 54
5 - Males, age 55 - 64
6 - Males, age 65 +
7 - Females, age 0 - 17
8 - Females, age 18 - 34
9 - Females, age 35 - 44
10 - Females, age 45 - 54
11 - Females, age 55 - 64
12 - Females, age 65 +

FOLOG Calls: None

Default: 13

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	1/23/1999	L. Richardson	4	1203	Converted to functional spec.

Drug Claims

Output Field:	**COPAY** Copay

Definition: Copayment or coinsurance paid by the patient as specified in the Medi-Cal program.

DB2 Name:	COPAY_AMT	**Type:**	DataScan Core Field	**Missing Value:**	None
Data Type:	DECIMAL	**Display Length:**	9, 2	**Storage Length:**	5

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-COPAY-AMOUNT	S9(3)V99	5

Logic: Set COPAY = F35-COPAY-AMOUNT (if numeric).

When F35-COPAY-AMOUNT not numeric set COPAY = 0 (zero).

FOLOG Calls: OPR-#3: When F35-COPAY-AMOUNT is numeric and does not equal zero (call FOLOG with F35-COPAT-AMOUNT)

OPR-#3: When F35-COPAY-AMOUNT is not numeric (call FOLOG with F35-COPAY-AMOUNT)

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/24/1999	L. Richardson	4	1203	Convert to functional spec.
	1/8/1999	C.Swanson	4	1203	Updated FOLOG, added operation number and diplayed field

Drug Claims

Output Field:	**COVERSTS**	C Over Stat

Definition:	Indicates whethor or not there was Medicare coverage at the time of payment.

DB2 Name:	CROSS_OVER_STAT	**Type:**	Medi-Cal Custom Field	**Missing Value:**	Spaces
Data Type:	CHARACTER	**Display Length:** 1		**Storage Length:** 1	

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-CROSSOVER-STATUS-CODE	CHARACTER	1

Logic: Valid Values for this field are:

1 - Medicare Part A Eligible
2 - Medicare Part B Eligible
3 - Both Medicare Part A and B Eligible
Space - Not Medicare Eligible

If the input field F35-CROSSOVER-STATUS-CODE does not contain a valid value, set to space.

FOLOG Calls: OPR #XX: If input field F35-CROSSOVER-STATUS-CODE is a value other than valid values (call FOLOG using F35-CROSSOVER-STATUS-CODE).

Default: Space - not Medicare Eligible

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	6/30/2002	C.Swanson	6	2811	Created field

Drug Claims

Output Field:	**CROSSOVR**	Crossover				

Definition: Crossover status code defines whether or not Medicare covers a recipient.

DB2 Name: CROSS_OVER_STAT	**Type:** Medi-Cal Custom Field	**Missing Value**: Spaces
Data Type: CHARACTER	**Display Length:** 1	**Storage Length:** 1

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-CROSSOVER-STATUS-CODE	CHARACTER	1

Logic: If F35-CROSSOVER-STATUS-CODE = '1' OR '2' OR '3'
   Move as-is to DRUG-CROSS-OVER-STAT
else
    move spaces to DRUG-CROSS-OVER-STAT
    call FOLOG

FOLOG Calls:

Default:

Precedents: None

Impact:

Tech. Notes: '1' = Medicare Part A Eligible
'2' = Medicare Part B Eligible
'3' = Both Medicare Part A and B Eligible
space = Not Medicare Eligible

Revisions:

Drug Claims

Output Field: DAW   DAW

Definition: Indicates the reason why the product dispensed was selected by the pharamacist. This code is used to explain why a generic was not dispensed. Currently not available from Medi-Cal service details.

DB2 Name: DISP_AS_WRITTEN   **Type:** Medi-Cal Custom Field   **Missing Value:** Spaces

Data Type: CHARACTER   **Display Length:** 1   **Storage Length:** 1

Input Fields:	Field Name	Data Type	Length
	N/A		

Logic: Set DAW = Space.

Note: For Medi-Cal, the DAW rules applied by the pharmacist when the prescription was filled are not required when billing a claim and therefore are not available on the input file.

FOLOG Calls: None

Default: Spaces.

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	1/24/1999	L. Richardson	4	1203	Converted to functional spec.

Drug Claims

Output Field:	**DAYSSUPP**	Days Supp	

Definition: The number of days of drug therapy covered by this dispensation of the prescription.

DB2 Name: DAYS_SUPPLY	**Type:** Medi-Cal Custom Field		**Missing Value:** Zero
Data Type: DECIMAL	**Display Length:** 3, 0		**Storage Length:** 2

Input Fields:

Field Name	Data Type	Length
F35-DAYS-SUPPLY	S9	3

Logic: When F35-DAYS-SUPPLY is numeric set DAYSSUPP = F35-DAYS-SUPPLY

When F35-DAYS-SUPPLY is NOT numeric set DAYSSUPP = 0 (zero)

FOLOG Calls: None

Default: Zero

Precedents: None

Impact:

Tech. Notes:

Revisions:

Date	Author(s)	Phase	IR(s)	Description
1/22/1999	L. Richardson	4	1203	Converted to functional spec.

Drug Claims

Output Field: **DEACLASS**	DEA Class	

Definition: A code identifying controlled substances as classified by the Drug Enforcement Agency (DEA). Currently not applicable for Medi-Cal.

DB2 Name: DEA_CLASS	**Type:** Medi-Cal Custom Field	**Missing Value:** Zero
Data Type: DECIMAL	**Display Length:** 1, 0	**Storage Length:** 1

Input Fields:	**Field Name**	**Data Type**	**Length**
	N/A	N/A	N/A

Logic: Drug Convert Logic:

Sets DEACLASS to zero.

DATASCAN CORE LOGIC:

DEACLASS is set to the DEACLASS found in the Redbook File when the NDC is found.

The valid values include:
1. Class I-High abuse potential, no acceptable medical use
2. Class II-High abuse potential, severe dependence liability
3. Class III-Less abuse potential, moderate dependence liability
4. Class IV-Less abuse potential, limited dependence liability
5. Class V-Limited abuse potential
6. Rx (Not classified under the Control Substance Act)
7. OTC Product
8. Other / Unavailable

If NDC is not found in the Redbook File, then DEACLASS remains set to 0 (zero)

FOLOG Calls: None

Default: Zero

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	8/4/1999	L. Richardson	5	823	Change MediSpan reference to Redbook and added the Redbook values 6, 7, & 8.
	1/23/1999	L. Richardson	4	1203	Converted to functional spec and added default

Drug Claims

Output Field: DEDUCT   Deductible

Definition: The share of cost amount paid by the patient to satisfy the individual and/or family deductible provisions of the plan. May also include "per confinement" deductibles.

DB2 Name: DEDUCT_AMT   **Type:** DataScan Core Field   **Missing Value:** None

Data Type: DECIMAL   **Display Length:** 9, 2   **Storage Length:** 5

Input Fields:

Field Name	Data Type	Length
F35-PATIENT-LIABILITY	S9(7)V9(2)	9
F35-SEGMENT-COUNT	S9(04)	2

Logic: F35-PATIENT-LIABILITY is a header-level field. We must use it only once, so we use it only for the first service detail for the claim. The logic is:

When F35-SEGMENT-COUNT = 1, set DEDUCT= F35-PATIENT-LIABILITY.

When F35-SEGMENT-COUNT <> 1, set DEDUCT = 0 (zero).

FOLOG Calls: OPR-#48: When LINENUM is equal to 1 and F35-PATIENT-LIABILITY is not numeric (call FOLOG with F35-BENE-ID)

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions:

Date	Author(s)	Phase	IR(s)	Description
5/8/2002	C.Swanson	6	2811	Changed input from LINENUM to F35-SEGMENT-COUNT
1/24/1999	L. Richardson	4	1203	convert to functional spec.
1/8/1999	C.Swanson	4	1203	Updated FOLOG, added operation number and diplayed field

Drug Claims

Output Field:	**DESIIND**	DESI Ind

Definition: Indicates that in the FDA's Drug Efficacy Study Implementation (DESI) the product is considered "less than effective". DESI drugs have a "Y" in this field. Assigned from Redbook.

DB2 Name:	DESI_DRUG_IND	Type:	Medi-Cal Custom Field	Missing Value:	Spaces
Data Type:	CHARACTER	Display Length:	1	Storage Length:	1

Input Fields:	Field Name	Data Type	Length
	N/A	N/A	N/A

Logic: Drug Convert Logic:

Set DESIIND to spaces.

DATASCAN CORE LOGIC:

DESIIND is tagged from the DESIIND found in the Redbook File when the NDC is found.

If NDC is not found in the Redbook File, then DESIIND remains set to spaces.

FOLOG Calls:

Default: Spaces.

Precedents: NDC

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	10/5/1999	G Holliday	5	1474	Modified Short and Long Desc. fields to match EGAD.
	8/4/1999	L. Richardson	5	823	Added this new field to the table.

Drug Claims

Output Field:	**DISPFEE**	Disp Fee

Definition: Administrative fee charged by the pharmacy for dispensing the prescription. Currently not applicable for Medi-Cal.

DB2 Name:	DISP_FEE	**Type:**	Medi-Cal Custom Field	**Missing Value:** None
Data Type:	DECIMAL	**Display Length:**	9, 2	**Storage Length:** 5

Input Fields:	**Field Name**	**Data Type**	**Length**
	N/A	N/A	N/A

Logic: Set DISPFEE = 0 (zero).

FOLOG Calls: None

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/22/1999	L. Richardson	4	1203	Converted to functional spec.

Drug Claims

Output Field: DRUGCODE   Drug Code

Definition: The State Drug Code or old Medi-Cal Code.

DB2 Name: DRUG_CODE	**Type:** Medi-Cal Custom Field	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 7	**Storage Length:** 7

Input Fields:

Logic: See NDC.

FOLOG Calls: None

Default: Spaces (missing value)

Precedents: None

Impact:

Tech. Notes:

Revisions:

Drug Claims

| **Output Field:** **DTROWUPD** | Date Row Upd |

Definition: The DB2 timestamp representing the date and time a row was inserted into the claims table.

| **DB2 Name:** DT_ROW_UPD | **Type:** DataScan Core Field | **Missing Value:** None |
| **Data Type:** TIMESTAMP | **Display Length:** 26 | **Storage Length:** 10 |

Input Fields:	**Field Name**		**Data Type**	**Length**
	N/A		N/A	N/A

Logic: This field is set to zero by the convert program and is then updated during the DATASCAN CORE - EDIT/INSERT process.

This field is the DB2 timestamp representing the date and time a row was inserted into the claims (or drug) table. The format of the field is : Year-Month-Day-Hours-Minutes-Seconds-Microseconds. This field is not available through the interactive DataScan system, it is used solely for the host software purposes.

FOLOG Calls: None

Default: Zero,

Precedents: None

Impact: DTROWUPD is not in any user views.

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	12/28/1998	L. Richardson	4	1203	Converted to Functional Spec, changed default to zero.

Drug Claims

Output Field: DX1	DX: Primary	

Definition: The primary diagnosis code for the specific inpatient or outpatient service. This will be the first diagnosis code for this service (ICD-9-CM).

DB2 Name: DX1_CD		**Type:** DataScan Core Field		**Missing Value:** Spaces
Data Type: CHARACTER		**Display Length:** 5		**Storage Length:** 5

Input Fields:	**Field Name**	**Data Type**	**Length**
	N/A	N/A	N/A

Logic: Set DX1 = space

(Data not provided on the input file)

FOLOG Calls: None

Default: Space,

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/22/1999	L. Richardson	4	1203	Convert to func spec.

Drug Claims

Output Field:	**ELIGCAT**	Elig Catg.

Definition: The broad category of eligibility based on Aid Code of eligible (AIDCODE).

DB2 Name: ELIG_CAT	**Type:** Medi-Cal Custom Field	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 2	**Storage Length:** 2

Input Fields:	**Field Name**	**Data Type**	**Length**
	AIDCODE	9	2

Logic: ELIGCAT is set in the AIDCODE specification. See AIDCODE.

FOLOG Calls: None

Default: Spaces (missing value). This is assigned if the mapping fails.

Precedents: AIDCODE

Impact: Panorama View: ELIGCAT is a Recipient Dimension (defined as Aid Category) and is found on the Drug Extract. Therefore, any change to the ELIGCAT values or descriptions need to be reflected in the Panorama View Catalog.

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/4/1999	J. Dittman	4	739	Added impact to PV.
	12/23/1998	L. Richardson	4	1203	Changed so that ELIGCAT is now being set in AIDCODEspe
	6/3/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field: ELIGCNTY	Elig County	

Definition: The county associated with the eligible. For services, this reflects the county which was responsible for the Medi-Cal eligible for the date of service on the claim or encounter. For the Population and the Eligibility table the county code reflects the county with the "Principal" Aid Code (see AIDCODE).

DB2 Name: COUNTY_CD	**Type:** Medi-Cal Custom Field	**Missing Value:** Zero
Data Type: DECIMAL	**Display Length:** 2, 0	**Storage Length:** 2

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-BID-CNTY	9	2

Logic: ELIGCNTY = F35-BID-CNTY when the value is 01 - 58.

ELIGCNTY = 98 (invalid county code) when the value is numeric but <> 01 - 58.

Note: Invalid F35-BID-CNTY is a drop condition in the Splitter, so no invalid code should get this far. ELIGCNTY should never = 98 or 0 (missing). The validation here is redundant.

FOLOG Calls: OPR-#40: When F35-BENE-ID (bytes 1 & 2) is not equal to '01' through '58' or spaces (call FOLOG with F35-BENE-ID bytes 1 & 2)

OPR-#: When F35-BENE-ID (bytes 1 & 2) is equal to spaces (call FOLOG with F35-BENE-ID bytes 1 & 2)

Default: 0 (missing value). This is assigned only if F35-BID-CNTY is non-numeric.

Precedents: None

Impact: Panorama View: This field is a Recipient Dimension and is found on the Drug Extract. Therefore, any change to the values or descriptions needs to be reflected in the Panorama View Catalog.

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/13/1999	C.Swanson	4	1203	Updated FOLOG call, added operation # and displayed field
	6/3/1998	L. Macklem	3	739	Rewrote as functional spec. In so doing, clarified input field (from F35-BENE-ID bytes 1 - 2) to be consistent with Splitter logic.
	12/31/1997	J. Dittman	2	555	Validate input value before moving, and set to 98 if invalid value.

Drug Claims

| **Output Field:** | **ELIGSTAT** | Elig Status |

Definition: A 3-character field representing the status associated with the Principal Aid Code (AIDCODE).

| **DB2 Name:** ELIG_STATUS_CD | **Type:** Medi-Cal Custom Field | **Missing Value:** Spaces |
| **Data Type:** CHARACTER | **Display Length:** 3 | **Storage Length:** 3 |

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-CIN	X	9
	SVCDATE	DATE	4

Logic: Look up ELIGSTAT in (tag from) Eligibility, matching on:

F35-CIN = Elig EMPID
SVCDATE = Elig ENROLLDT (match only on year and month).

FOLOG Calls: None

Default: Spaces (missing value). This is assigned if the tagging fails.

Precedents: SVCDATE

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	6/3/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field: **EMPID**	CIN no

Definition: The Client Index Number assigned by DHS to the eligible. This field is encrypted.

DB2 Name: EMP_ID	Type: DataScan Core Field	Missing Value: Spaces
Data Type: CHARACTER	Display Length: 12	Storage Length: 12

Input Fields:	Field Name	Data Type	Length
	F35-CIN	X	9

Logic: EMPID = F35-CIN (Move as Is)

Note: Invalid F35-CIN is a drop condition in the Splitter program, a record is dropped during Splitter processing if the F35-CIN is all spaces, all zeros, or low values). This field is encrypted.

FOLOG Calls: None

Default: None

Precedents: None

Impact: EMPID is the main element of the patient identifier throughout the DataScan and PMW databases (the other element is MEMBERNO). It is used to group claims for building DataScan inpatient Cases and Episodes of Care. It is often used in study group views to identify a group of patients. Therefore, it is very important that EMPID be assigned consistently throughout the system.

EMPID ties medical claims, drug claims, Cases and Episodes to the Eligibility table. It is also used in the convert program as the matching key for tagging Eligibility fields to Claims, and for setting NEWBORN and MEMBERNO.

Panorama View: EMPID is used to identify unique recipients and is therefore found on the Drug Extract.

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	11/17/2000	C.Swanson	6	1921	Added note to spec logic that this field is encrypted.
	1/13/1999	C.Swanson	4	1202	Removed FOLOG call. IR 750 removed logic.
	11/6/1998	L Richardson	3	750	Changed the logic to move as is based on the fact that the Splitter program handles the validation of the F35-CIN and drops records with invalid CIN.
	6/1/1998	L. Macklem	3	739	Rewrote as functional spec.
	1/4/1998	J. Dittman	4	739	Added impact to PV.

Drug Claims

Output Field:	**EMPREL**	Emp Rel	

Definition:	This value will always be set to 1 for Medi-Cal. Hidden for Medi-Cal.

DB2 Name:	EMP_REL_CD	**Type:**	DataScan Core Field	**Missing Value:**	None
Data Type:	DECIMAL	**Display Length:**	2, 0	**Storage Length:**	2

Input Fields:	**Field Name**	**Data Type**	**Length**
	N/A	N/A	N/A

Logic: Set EMPREL = 1

Note: This field is designed to categorize employees from spouses and dependents using the DATASCAN CORE valid values are 1 -Employee, 2-Spouse, 3-Child/Other Dependent, 4-Any Dependent. This relationship recognition is not designed for Medi-Cal but instead for the support of employer based health insurance plans where family members typically share a common ID. In Medi-Cal each individual has their own ID (the CIN) and therefore, this field is used only because it is a DATASCAN required field and it is always set to 1-Employee for all eligibles

FOLOG Calls: None

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/8/1999	K. Key	4	N/A	In order to match the EGAD table, modified the missing rule be zero instead of none.
	12/24/1998	L. Richardson	4	1203	Changed missing rule to none, and added clarifying note.
	11/24/1998	Tina Poyner	3	1130	Added to spec logic "Core Logic (Episode Build)".
	6/16/1998	Tina Poyner	3	N/A	Changed back to Decimal 2 until further clarification
	6/15/1998	Tina Poyner	3	N/A	Changed from Decimal 2 to Decimal 1 per AA

Drug Claims

Output Field: **EMPZIP**	Elig Zipcode

Definition: The zip code as reported on the eligible/recipient's MEDS record.

DB2 Name: EMP_ZIP_CD	**Type:** DataScan Core Field	**Missing Value**: Zero
Data Type: INTEGER	**Display Length:** 5	**Storage Length:** 4

Input Fields: **Field Name**	**Data Type**	**Length**
F35-CIN	X	9
MBR-EMPID	X	12
MBR-EMPZIP	INTEGER	9
MBR-ENROLLDT	DATE	4
SVCDATE	DATE	4

Logic: Look up EMPZIP in (tag from) the Eligibility table, matching on:

    F35-CIN = EMPID
    SVCDATE = ENROLDT (for the match, set SVCDATE day-of-month to 1, since ENROLDT is always the first of the month)

When a match is found, set EMPZIP = EMPZIP from the Eligibility Table, if the Eligibility table EMPZIP is not equal to all zeros, 9s or low values.

If the Eligibility table EMPZIP is equal to all zeros, 9s or low values, set EMPZIP to zero (missing).

FOLOG Calls: None

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions: **Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
12/26/1998	L. Richardson	4	1203	Converted to functional spec and consistent with the Claims Table EMPZIP logic.

Drug Claims

Output Field: ENCNTRS   Encounters

Definition: When using the "unique count" feature in DataScan custom reporting, this field allows the user to count the number encounters, defined as the unique combination of EMPID, MEMBERNO, PROVID, and SVCDATE. This field is only available in DataScan.

DB2 Name: N/A   **Type:** Medi-Cal Custom Field   **Missing Value:** Spaces

Data Type: CHARACTER   **Display Length:** 31   **Storage Length:** 31

Input Fields:

Field Name	Data Type	Length
EMPID	CHARACTER	12
MEMBERNO	DECIMAL	9
SVCDATE	DATE	10

Logic: This field is a combination of the EMPID, MEMBERNO, PROVID, and SVCDATE fields and is a user defined field in DataScan. This field is only to be used in Custom Reporting with the "unique counts" feature and is used to count the number of encounters.

FOLOG Calls:

Default:

Precedents: None

Impact:

Tech. Notes: This is a DataScan user defined field.

Revisions:

Date	Author(s)	Phase	IR(s)	Description
9/7/1999	RVJ/TRP	5	N/A	Added DataScan user defined field.

Drug Claims

Output Field: **EPIID**		Episode ID			

Definition: Contains a unique ID number for every Episode record.

DB2 Name: EPISODE_ID		**Type:** Medi-Cal Custom Field		**Missing Value:** Zero
Data Type: DECIMAL	**Display Length:** 11, 0		**Storage Length:** 6	

Input Fields:

Logic: Drug Convert Logic:

Set EPIID = zeros.

DataScan Core Logic (Episode Build).

EPIID is set if the Drug Claim is included in an Episode. EPIID contains a unique identification number for every Episode record, assigned sequentially from the last EPIID used.

If the Drug claim is not used in an Episode, EPIID remains zeros.

The Episode ID will be changed to a value of '-1' for any record containing an NDC code that will never be assigned to an episode.

FOLOG Calls:

Default: Zeros.

Precedents: None

Impact:

Tech. Notes:

Revisions: **Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
8/20/2001	D. Boorse	6	0000	Updated specs to reflect '-1' value logic.
8/4/1999	L. Richardson	5	823	New field to the Drug Table.

Drug Claims

Output Field: **ETHNCTY**		Ethnicity		

Definition: The ethnicity of the Medi-Cal beneficiary.

DB2 Name: ETHNICITY_ELIG	**Type:** Medi-Cal Custom Field	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 2	**Storage Length:** 2

Input Fields:

Field Name	Data Type	Length
F35-CIN	X	9
MBR-EMPID	X	9
MBR-ENROLLDT	DATE	10
MBR-ETHNCTY	X	2
SVCDATE	DATE	10

Logic: Look up in the Eligibility Table matching on:

> F35-CIN = MBR-EMPID
> SVCDATE = MBR-ENROLLDT (match only on year and month).

When an Elig-Match is found, set ETHNCTY = MBR-ETHNCTY.

If no Elig-Match is found, Set ETHNCTY = spaces (missing)

FOLOG Calls: OPR-#51: When an Elig-Match is found and MBR-ETHNCTY is equal to spaces (call FOLOG with MBR-ETHNCTY).

Default: Spaces (missing value), assigned when Tag from Elig fails, or if Elig was set to missing during the Elig convert.

Precedents: SVCDATE

Impact: Panorama View: This field is a Recipient Dimension and is found on the Drug Extract. Therefore, any change to ETHNCTY values or descriptions needs to be reflected in the Panorama View Catalog.

Tech. Notes:

Revisions:

Date	Author(s)	Phase	IR(s)	Description
8/11/1999	L Richardson	5	1247	Changed logic to tag from Elig or set to missing, changed FOLOG OPR #51 to be called when MBR-ETHNCTY is spaces, no longer checks F35-BENE-RACE or the map.
1/13/1999	C.Swanson	4	1203	Updated FOLOG call, added operation # and displayed field
1/4/1999	J. Dittman	4	739	Added impact to PV.
12/26/1998	L Richardson	4	1203	Added more clarifying information to the logic section.
6/3/1998	L. Macklem	3	739	Rewrote as functional spec.
12/11/1997	J. Dittman	2	435 474	Use F35-BENE-RACE if tag fails.

Drug Claims

Output Field:	**EXCEPIND**	ExceptN Ind

Definition: Identifies product categories that may be excluded from coverage by certain third-party programs. Assigned from Redbook.

DB2 Name: EXCEP_DRUG_IND	**Type:** Medi-Cal Custom Field	**Missing Value:** Zero
Data Type: DECIMAL	**Display Length:** 2, 0	**Storage Length:** 2

Input Fields:	**Field Name**	**Data Type**	**Length**
	NDC	CHARACTER	11

Logic: Drug Convert Logic:

Set EXCEPIND to Zero.

DataScan Core Logic:

EXCEPIND is set to the EXCEPIND from the Redbook file when NDC is found.

If the NDC is not found, then EXCEPIND remains set to zero.

FOLOG Calls:

Default: Zeroes.

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	10/5/1999	G Holliday	5	1474	Modified Short and Long Desc. fields to match EGAD.
	8/4/1999	L. Richardson	5	823	New field added to the Drug Table.

Drug Claims

Output Field:	**FBU**	Budget Unit

Definition: A view of the 8th byte of the CASENUM field that represents the Family Budget Unit assigned by the county

DB2 Name:	FBU	Type:	Medi-Cal Custom Field	Missing Value:	Spaces
Data Type:	CHARACTER	Display Length:	1	Storage Length:	1

Input Fields:	Field Name		Data Type	Length
	CASENUM		CHARACTER	10

Logic: FBU = the 8th byte of the CASENUM

FOLOG Calls:

Default: Spaces when CASENUM is set to spaces.

Precedents: CASENUM

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	8/6/2002	C.Swanson	6	2811	Removed reference to FBU being a "view" of the CASENUM FBU will now be a separate field.
	10/8/1999	L. Richardson	5	1257	Added to the table.

Drug Claims

Output Field: FCASEFBU   Case Nbr FBU

Definition: A view of the first 8 bytes of the CASENUM field that represents the family case number and budget unit assigned by the county. The first 7 bytes are encrypted.

DB2 Name: FCASEFBU   **Type:** Medi-Cal Custom Field   **Missing Value:** Spaces

Data Type: CHARACTER   **Display Length:** 8   **Storage Length:** 8

Input Fields:	Field Name	Data Type	Length
	CASENUM	CHARACTER	10

Logic: FCASEFBU = the first 8 bytes of CASENUM

NOTE: The first 7 bytes of this field are encrypted.

FOLOG Calls:

Default: Spaces when CASENUM is set to spaces.

Precedents: CASENUM

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	8/6/2002	C.Swanson	6	2811	Removed reference to FCASEFBU being a "view" of the CASENUM. FCASEFBU will now be a separate field.
	11/29/2000	C.Swanson	6	1921	Added encryption note to logic
	10/8/1999	L. Richardson	5	1257	Added to the table.

Drug Claims

Output Field: FCASENBR   Fam Case Nbr

Definition: A view of the first 7 bytes of the CASENUM field that represents the case number assigned by the county for the family. The first 7 bytes are encrypted.

DB2 Name: FCASENBR	**Type:** Medi-Cal Custom Field	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 7	**Storage Length:** 7

Input Fields:	**Field Name**	**Data Type**	**Length**
	CASENUM	CHARACTER	10

Logic: FCASENBR = the first 7 bytes of CASENUM

NOTE: This field is encrypted.

FOLOG Calls:

Default: Spaces when CASENUM is set to spaces.

Precedents: CASENUM

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	8/6/2002	C.Swanson	6	2811	Removed reference to FCASENBR being a "view" of the CASENUM. FCASENBR will now be a separate field.
	11/29/2000	C.Swanson	6	1921	Added encryption note to logic
	10/8/1999	L. Richardson	5	1257	Added to the table.

Drug Claims

Output Field: **GENERID**	Generic ID		

Definition: Identifies the active ingredient(s) in a product. Assigned from Redbook.			

DB2 Name: GENERIC_ID	**Type:** Medi-Cal Custom Field	**Missing Value**: Zero
Data Type: INTEGER	**Display Length:** 9	**Storage Length:** 4

Input Fields:	**Field Name**	**Data Type**	**Length**
	N/A	N/A	N/A

Logic: Drug Convert Logic:

Sets GENERID to zero.

DATASCAN CORE LOGIC:

GENERID is set to the GENERIC-ID found in the Redbook File when the NDC is found.
If NDC is not found in the Redbook File, then GENERID remains set to 0 (zero)

FOLOG Calls: None

Default: Zero

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	8/4/1999	L. Richardson	5	823	Changed MediSpan references to Redbook.
	1/22/1999	L. Richardson	4	1203	Converted to functional spec.

Drug Claims

Output Field:	**GENIND**	Generic Ind

Definition: The code identifying products as either original standard product or a generic equivalent of the standard product. This will be assigned from Redbook.

DB2 Name: GENERIC_IND	**Type:** Medi-Cal Custom Field	**Missing Value:** Zero
Data Type: DECIMAL	**Display Length:** 1, 0	**Storage Length:** 1

Input Fields:	**Field Name**	**Data Type**	**Length**
	N/A	N/A	N/A

Logic: Drug Convert Logic:

Sets GENIND to zero.

DATASCAN CORE LOGIC:

GENIND is set to the GENERIC-IND found in the Redbook File when the NDC is found.

The valid values include:
1. Single Source - Brand
2. Not used.
3. Mulit Source - Brand
4. Mulit Source - Generic
5. Single Source - Generic
6. Over the Counter
7. Other / Unavailable

If NDC is not found in the Redbook File, then GENIND remains set to 0 (zero)

FOLOG Calls: None

Default: Zero

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	8/5/1999	L. Richardson	5	823	Changed Medi-Span to Redbook and changed the valid values to match Redbook values.
	1/22/1999	L. Richardson	4	1203	Converted to functional spec.

Drug Claims

Output Field: GEOLOC   Geoloc

Definition: Locations defined by The MEDSTAT Group, based on the eligible's zip code.

DB2 Name: GEOLOC	**Type:** DataScan Core Field	**Missing Value:** Zero
Data Type: SMALLINT	**Display Length:** 5	**Storage Length:** 2

Input Fields: Field Name   **Data Type**   **Length**

N/A   N/A   N/A

Logic: Drug Convert Logic:

Sets GEOLOC to 0 (zero)

DATASCAN CORE Logic:

Maps GEOLOC during the Edit process using the EMPZIP. When the EMPZIP is part of a Metropolitan Statistical Area (MSA), the MSA code plus 10,000 is assigned to GEOLOC. For example if the EMPZIP belongs to MSA 2160, then the value 12160 is assigned to GEOLOC.

When EMPZIP is not part of a specific MSA, the Edit process will attempt to map EMPZIP to a state code. If the EMPZIP is non-specific and can not be mapped to a state code, Edit will attempt to map it to a region code. If it can not be mapped to a region code, GEOLOC is assigned the value '001 - Nation, unknown region'.

FOLOG Calls: None

Default: Zero.

Precedents: None

Impact:

Tech. Notes:

Revisions: | Date | Author(s) | Phase | IR(s) | Description |
|---|---|---|---|---|
| 1/24/1999 | L. Richardson | 4 | 1203 | Converted to a functional spec. |

Drug Claims

Output Field:	**HDRPAID**	Header Paid

Definition: This is the F35-Header-Medi-Cal-Paid-Amount. This value is moved to DSS claim that represents the first detail segment from the F35-File claim record. Depending on the service, this value could end up on either the Drug Table or one of the Claim Tables.

DB2 Name:	HEADER_PAID_AMT	Type:	Medi-Cal Custom Field	Missing Value:	Zero
Data Type:	DECIMAL	Display Length:	9, 2	Storage Length:	5

Input Fields:	Field Name	Data Type	Length
	F35-HDR-TOTAL-MEDI-CAL-PAID-AMT	S9(7)V99	9
	F35-PLAN-CODE	X	2
	F35-SEGMENT-COUNT	99	2

Logic: When f35-Plan-Code is not equal to 02 (GMC) or 04 (COHS)
and the f35-Segment-Count is equal to 1,
Set HDRPAID = F35-HDR-Total-Medi-Cal-Paid-Amt.

Otherwise, set HDRPAID = zero.

FOLOG Calls:

Default: Zero

Precedents: None

Impact:

Tech. Notes: This field is moved to only the first detail segment that becomes a claim record on the DSS. Because of the way the Splitter program may split claim details between the Drug and Claim Table, this field may show up on any one of these two tables, depending on which table receives the first detail service record.

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	5/9/2002	C.Swanson	6	2811	Changed input field length of plan code to 2
	1/11/2000	L Richardson	5.3	1530	New field added.

Drug Claims

Output Field: HEDISCOH   HEDIS Cohort

Definition: The thirty-four age and gender cohorts defined by NCQA for HEDIS reporting.

DB2 Name: HEDIS_COHORT_TYP   **Type:** DataScan Core Field   **Missing Value:** Zero

Data Type: SMALLINT   **Display Length:** 5   **Storage Length:** 2

Input Fields:	Field Name	Data Type	Length
	N/A	N/A	N/A

Logic: Drug Convert Logic:

Sets HEDISCOH to 0 (zero).

DATASCAN CORE Logic:

Sets HEDISCOH to the HEDIS COHORT assignment found in the MEDSTAT HEDIS COHORT Table based on a match of AGE and SEX. When the AGE and SEX values are matched the following valid values will be assigned:

1 Males, age < 1
2 Males, age 1-4
3 Males, age 5-9
4 Males, age 10-14
5 Males, age 15-19
6 Males, age 20-24
7 Males, age 25-29
8 Males, age 30-34
9 Males, age 35-39
10 Males, age 40-44
11 Males, age 45-49
12 Males, age 50-54
13 Males, age 55-59
14 Males, age 60-64
15 Males, age 65-74
16 Males, age 75-84
17 Males, age 85 +
31 Females, age < 1
32 Females, age 1-4
33 Females, age 5-9
34 Females, age 10-14
35 Females, age 15-19
36 Females, age 20-24
37 Females, age 25-29
38 Females, age 30-34
39 Females, age 35-39
40 Females, age 40-44
41 Females, age 45-49
42 Females, age 50-54
43 Females, age 55-59
44 Females, age 60-64
45 Females, age 65-74
46 Females, age 75-84
47 Females, age 85 +

Drug Claims

Output Field:	**HEDISCOH**	HEDIS Cohort

FOLOG Calls: None

Default: Zero

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/23/1999	L. Richardson	4	1203	Converted to functional spec.

Drug Claims

Output Field: HFPANUM　　　HFPA Num

Definition: The Health Facility Planning Area (HFPA), derived from Zip Code: Provider (PROVZIP) and a file provided by the Office of Statewide Health Planning and Development (OSHPD).

DB2 Name: HFPA_NUM	Type: Medi-Cal Custom Field	Missing Value: Zero
Data Type: SMALLINT	Display Length: 4	Storage Length: 2

Input Fields:	Field Name	Data Type	Length
	PROVZIP	INTEGER	9

Logic: Look up HFPANUM in (map from) the HFPAnum map, matching on:

　　PROVZIP = HFPAnum PROVZIP

When a match is found, set HFPANUM = HFPANUM from the map.
If no match is found set HFPANUM equal to zero (missing).

Note: the map HFPANUM includes only PROVZIP values > 90000 (California).

FOLOG Calls: OPR-#54: When PROVZIP is between 90001 and 99999 but there is no match for Zip Code on HFPANUM (call FOLOG with PROVZIP)

Default: Zero (missing value). This is assigned if the mapping fails.

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	1/21/1999	K. Key	4	1196	Deleted "For selected providers, provider type 22 (Physician and Osteopath Groups) and provider type 26 (Physicians and Osteopaths) with multiple locations and where the Medi-Cal Provider Id does not begin with an 'X', this is derived from servicing zip code of the last assigned Medi-Cal Provider Id.' from the definition.
	1/13/1999	C.Swanson	4	1203	Updated FOLOG call, added operation # and displayed field
	12/26/1998	L. Richardson	4	1203	Clarified mapping logic.
	6/5/1998	L. Macklem	3	739	Rewrote as functional spec. In so doing, reworded to make consistent with Claim spec.

Drug Claims

Output Field: INGCOST   Ingred Cost

Definition: The charge or cost associated with the pharmaceutical product. The ingredient cost plus the dispensing fee and sales tax, if applicable, usually represents the entire cost of a prescription.

DB2 Name: ING_COST	**Type:** Medi-Cal Custom Field	**Missing Value:** None
Data Type: DECIMAL	**Display Length:** 9, 2	**Storage Length:** 5

Input Fields: Field Name	**Data Type**	**Length**
N/A	N/A	N/A

Logic: Set INGCOST = 0 (zero)

Note: INGCOST not required in Medi-Cal claims submission and, therefore, not available in the input file.

FOLOG Calls: None

Default: Zero.

Precedents: None

Impact:

Tech. Notes:

Revisions: Date	**Author(s)**	**Phase**	**IR(s)**	**Description**
1/24/1999	L. Richardson	4	1203	Converted to functional spec.

Drug Claims

Output Field: **LANGUAGE**   Lang Elig

Definition: The language as received from the eligible's MEDS record.

DB2 Name: LANGUAGE_ELIG		**Type:** Medi-Cal Custom Field		**Missing Value:** Spaces	
Data Type: CHARACTER		**Display Length:** 2		**Storage Length:** 2	

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-CIN	X	9
	SVCDATE	DATE	4

Logic: Look up LANGUAGE in (tag from) Eligibility, matching on both the following:

F35-CIN = Elig EMPID
SVCDATE = Elig ENROLLDT (match on year and month only).

When the match is found, if the Elig Table value for Language is not low values move the Elig LANGUAGE to LANGUAGE. If the Elig Table value for LANGUAGE is low values or no match is found, set LANGUAGE to spaces (missing).

FOLOG Calls: None

Default: Spaces (missing value). This is assigned if the tag fails.

Precedents: SVCDATE

Impact: Panorama View: this field is a Recipient Dimension and is found on the Drug Extract. Therefore, any change to the LANGUAGE values or descriptions needs to be reflected in the Panorama View Catalog.

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/4/1999	J. Dittman	4	739	Added impact to PV.
	12/28/1998	L. Richardson	4	1203	Clarified the tagging statement.
	6/5/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field: LATCODE   Latitude

Definition: Latitude assigned for use by MapInfo, consisting of a 7-digit signed number. For claims, assigned based on the servicing address of the billing provider.

DB2 Name: LATITUDE_MEASURE   **Type:** Medi-Cal Custom Field   **Missing Value:** None

Data Type: DECIMAL   **Display Length:** 7, 4   **Storage Length:** 4

Input Fields:	Field Name	Data Type	Length
	F35-PROVIDER-NUMBER	X	9

Logic: LATCODE is set during the tagging of PROVID. See field level spec for PROVID. See also GeoCoding Background Document for more information.

FOLOG Calls: None

Default: Zero . This will be assigned if the input value does not match *any* of the listed IDs in the Provider Background table.

Precedents: None

Impact: Provider latitude and longitude codes are used with MapInfo to graphically display access patterns. For both Drug and Claim records, these reflect the location of the provider represented by PROVID. For Drug records, they reflect the location of the pharmacy/pharmacist that filled the prescription.

Tech. Notes: A DB2 view has been created effective TB3.2 and thereafter to allow the display of 4 decimal places in LATCODE and LONGCODE fields in DataScan and IQ/Objects. This DB2 view allows the numeric fields to be viewed as character fields. When a field is viewed as a character field, no arithmetic operations can be performed on it.
In order for the field to be displayed as a character field when it is stored as a decimal value, the DM Workbook will state that the field is decimal and has a data length of 4. The EGAD Detail will represent this field as a character field with a length of 10.

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	6/23/1999	K. Key	4	N/A	Added reference to the GeoCode Background Document.
	1/22/1999	L. Richardson	4	1203	Indicated that the tagging logic is defined under PROVID.
	1/21/1999	C. Hubbert	4	1203	Clarified technical notes stating why there is a difference between the DM Workbook and the EGAD Detail.
	1/20/1999	C.Swanson	4	1203	Removed documentation of FOLOG call - no longer exists
	12/28/1998	L. Richardson	4	1203	Clarified the tagging logic.
	10/28/1998	C. Hubbert	3	824	Updated Technical Notes with DB2 view information
	8/6/1998	C. Hubbert	3	1000	Added PROVPLAN as one of the provider identifier fields to tag on.
	8/5/1998	C. Hubbert	3	1037	Add PROVLICU to match criteria for tagging. PROVLICU i the Uncollapsed Provider License number.
	5/28/1998	L. Richardson L. Macklem	3	824	Changed to numeric to support MAPINFO. Clarified that missing value is valid value.
	5/27/1998	L. Macklem	3	739	Rewrote as functional spec. In so doing, combined LATCOI and LONGCODE.

Drug Claims

Output Field:	**LINENUM**	Line Number

Definition: A number on the claim that identifies the service detail line, as reported on the 35-File. Please note that this line number may not match the line number reported on the original claim, as segments are sometimes modified during Claims Adjudication processing See also, Claim Number (ICN).

DB2 Name: LINE_NUMBER	**Type:** Medi-Cal Custom Field	**Missing Value:** Zero
Data Type: SMALLINT	**Display Length:** 2	**Storage Length:** 2

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-SEQ-LINE-NUMBER	NUMERIC	2

Logic: LINENUM = F35-SEQ-LINE-NUMBER (output of Splitter). See Splitter background document for further information.

FOLOG Calls: None

Default: Zero

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	3/12/2003	J.Abbott	6	3001	Change input field to F35-SEQ-LINE-NUMBER
	5/6/2002	C.Swanson	6	2811	Changed input field to F35-CCN-LINE-NUMBER
	1/8/1999	K. Key	4	N/A	In order to match the EGAD table, modified the missing rule be zero instead of none.
	12/27/1998	L. Richardson	4	1203	Added note about drop criteria in splitter and changed missing rule from zero to none.
	6/5/1998	L. Macklem	3	826	The Splitter now moves the segment number into F35-SEGMENT-CNT, rather than the Drug convert program assigning it from an internal counter.

Drug Claims

Output Field:	**LINEORIG**	Orig. Line

Definition: A number on the claim that identifies the service detail line, as reported by ITSD on the F35 file. See also Claim Number (ICN) and Line Number (LINENUM).

DB2 Name: LINE_ORIG	**Type:** Medi-Cal Custom Field	**Missing Value:** Zero
Data Type: SMALLINT	**Display Length:** 2	**Storage Length:** 2

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-CCN-LINE-NUMBER	NUMERIC	2

Logic: LINE-ORIG = F35-CCN-Line-Number if numeric
Otherwise set to 0 (missing)

FOLOG Calls:

Default: zero

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	3/12/2003	J.Abbott	6	3001	Wrote spec.

Drug Claims

Output Field: LONGCODE   Longitude

Definition:	Longitude assigned for use by MapInfo, consisting of a 7-digit number. For claims, assigned based on the servicing address of the billing provider.

DB2 Name: LONGITUDE_MEASURE   **Type**: Medi-Cal Custom Field   **Missing Value**: None

Data Type: DECIMAL   **Display Length**: 7, 4   **Storage Length**: 4

Input Fields:	Field Name	Data Type	Length
	F35-PROVIDER-NUMBER	X	9

Logic: LONGCODE is set during the PROVID tagging. See PROVID. See also GeoCoding Background Document for more information.

FOLOG Calls: None

Default: Zero . This will be assigned if the input value does not match *any* of the listed IDs in the Provider Background table.

Precedents: None

Impact: Provider latitude and longitude codes are used with MapInfo to graphically display access patterns. For both Drug and Claim records, these reflect the location of the provider represented by PROVID. For Drug records, they reflect the location of the pharmacy/pharmacist that filled the prescription.

Tech. Notes: A DB2 view has been created effective TB3.2 and thereafter to allow the display of 4 decimal places in LATCODE and LONGCODE fields in DataScan and IQ/Objects. This DB2 view allows the numeric fields to be viewed as character fields. When a field is viewed as a character field, no arithmetic operations can be performed on it.

In order for the field to be displayed as a character field in DataScan when it is stored as a decimal value, the DM Workbook will state that the field is decimal and has a data length of 4. The EGAD Detail will represent this field as a character field with a length of 10.

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	6/23/1999	K. Key	4	N/A	1) Added reference to the GeoCode Background Document. Added impact statement.
	1/22/1999	L. Richardson	4	1203	Indicated that the logic is done in PROVID.
	1/21/1999	C. Hubbert	4	1203	Clarified technical notes stating why there is a difference between the DM Workbook and the EGAD Detail.
	1/20/1999	C.Swanson	4	1203	Removed documentation of FOLOG call - no long exists
	1/8/1999	K. Key	4	N/A	In order to match the EGAD table, modified the missing rule be none instead of zero.
	10/28/1998	C. Hubbert	3	824	Updated Technical Notes with DB2 view information
	8/6/1998	C. Hubbert	3	1000	Added PROVPLAN as one of the provider identifier fields to tag on.
	8/5/1998	C. Hubbert	3	1037	Add PROVLICU to match criteria for tagging. PROVLICU i the Uncollapsed Provider License number.
	5/28/1998	L. Richardson	3	824	Chg to numeric to support MAPINFO.
	5/18/1998	L. Macklem	3	739	Combined with LATCODE.

Drug Claims

Output Field: MAINTIND   Maint Ind

Definition: Identifies which drugs meet the maintenance drug criteria. Drugs which meet the following criteria are coded as maintenance drugs: a) low probability for dosage or therapy changes; b) commonly used to treat chronic disease states; and c) usually administered continuously rather than intermittently.

DB2 Name: MAINT_IND   **Type:** Medi-Cal Custom Field   **Missing Value:** Zero

Data Type: DECIMAL   **Display Length:** 1, 0   **Storage Length:** 1

Input Fields:	Field Name	Data Type	Length
	N/A	N/A	N/A

Logic: Drug Convert Logic:

Sets MAINTIND to zero.

DATASCAN CORE LOGIC:

MAINTIND is set to the MAINTIND found in the Redbook File when the NDC is found.
The valid values include:
1. Used primarily for long-term treatment of chronic conditions.
2. Used primarily for both acute and chronic conditions.
3. Used primarily for short-term treatment of acute conditions.
4. Other / Unavailable.

If NDC is not found in the Redbook File, then MAINTIND remains set to 0 (zero)

FOLOG Calls: None

Default: Zero

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	8/4/1999	L. Richardson	5	823	Changed MediSpan references to Redbook, and added the Redbook valid values.
	1/23/1999	L. Richardson	4	1203	Converted to functional spec and added default.

Drug Claims

Output Field: **MCALAGE**   M-Cal Age Gp

Definition: A value identifying the eligible's Medi-Cal age group.

DB2 Name: MCAL_AGE_GRP	**Type:** Medi-Cal Custom Field	**Missing Value:** Zero
Data Type: DECIMAL	**Display Length:** 2, 0	**Storage Length:** 2

Input Fields:

Field Name	Data Type	Length
AGE	9	3

Logic: Look up MCALAGE in (map from) the MCALAGE map, matching on:

   AGE = MCALAGE Age Value

When a match is found set MCALAGE to the MCALAGE Age Value found in the map.

If no match is found set MCALAGE to zero (missing).
 **This is assigned if AGE is missing (NULL) or AGE > 125 (maximum Age Value on the map).

FOLOG Calls: None

Default: Zero (missing value).

Precedents: AGE

Impact: Panorama View: MCALAGE is a Recipient Dimension and is found on the Drug Extract. Therefore, any change to MCALAGE values or descriptions needs to be reflected in the Panorama View Catalog.

Tech. Notes:

Revisions:

Date	Author(s)	Phase	IR(s)	Description
1/20/1999	C.Swanson	4	1203	Updated FOLOG, added operation # and displayed field
1/4/1999	J. Dittman	4	739	Added impact to PV.
12/29/1998	L. Richardson	4	1203	Corrected the max age to 125 and clarified the mapping logi
6/5/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field:	**MCALPOS**	Medi-Cal POS

Definition: The Medi-Cal place of service as reported on the claim or encounter. Based on the 35-File field MIO-POS.

DB2 Name: MCAL_POS	**Type:** Medi-Cal Custom Field	**Missing Value**: Spaces
Data Type: CHARACTER	**Display Length:** 1	**Storage Length:** 1

Input Fields:	Field Name	Data Type	Length
	F35-MIO-POS	X	1

Logic: MCALPOS = F35-MIO-POS.

FOLOG Calls: None

Default: None

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	6/5/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field: MDC	MDC

Definition: A value assigned by The MEDSTAT Group to inpatient admissions and outpatient services identifying the major diagnostic category based on the diagnosis. Assigned using the HCFA DRG grouper. MDC is set to 0 (zero) on Drug Claims.

DB2 Name: MDC_CD	**Type:** DataScan Core Field	**Missing Value:** None
Data Type: SMALLINT	**Display Length:** 5	**Storage Length:** 2

Input Fields:	**Field Name**	**Data Type**	**Length**
	N/A	N/A	N/A

Logic: Drug Convert Logic:

Sets MDC to 0 (zero).

DATASCAN CORE Logic:

The Edit process requires valid values in the converted fields SEX and DX1 for the assignment of MDC. Because DX1 is always missing on the Drug Claims in the Medi-Cal DSS, the MDC will always remain the default value of 0 (zero).

FOLOG Calls: None

Default: Zero

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/24/1999	L. Richardson	4	1203	Converted to functional spec.

Drug Claims

Output Field: **MEDICARE**   Medicare Ind

Definition: Indicates Medicare coverage. On Inpatient Service, Outpatient Service, Episode and Drug tables, indicates Medicare payment for some portion of the claim.   On the Population table, indicates the individual is eligible for Medicare.

DB2 Name: MEDICARE_IND	**Type:** Medi-Cal Custom Field		**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 1		**Storage Length:** 1

Input Fields: **Field Name**	**Data Type**	**Length**
F35-MEDICARE-INDICATOR	X	1

Logic: MEDICARE = 1 when F35-MEDICARE-INDICATOR = 1.

Note: Through Phase 4, the Splitter drops all records where F35-MEDICARE-INDICATOR = 1, so MEDICARE should always = missing (space) before Phase 5.

FOLOG Calls: None

Default: Space (missing value). This is assigned when the input field <> 1.

Precedents: None

Impact: Panorama View: this field is on the Drug Extract for use at a later date.

Tech. Notes:

Revisions: **Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
1/4/1999	J. Dittman	4	739	Added impact to PV.

Drug Claims

| **Output Field:** | **MEDPHP** | Medical PHP |

Definition: The Medical Plan for an Eligible.

| **DB2 Name:** MED_PHP | **Type:** Medi-Cal Custom Field | **Missing Value:** Spaces |
| **Data Type:** CHARACTER | **Display Length:** 3 | **Storage Length:** 3 |

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-CIN	X	9
	MBR-EMPID	X	9
	MBR-ENROLLDT	DATE	10
	MBR-MEDPHP	X	3
	SVCDATE	DATE	10

Logic: Look up MEDPHP in (tag from) Eligibility, matching on:

F35-CIN = MBR-EMPID
SVCDATE = MBR-ENROLLDT (match only on year and month).

When an Elig-Match is found, set MEDPHP = MBR-MEDPHP

If there was no matching Elig record, set MEDPHP = spaces (missing).

FOLOG Calls:

Default: Spaces, when no Elig-Match can be found.

Precedents: SVCDATE

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	8/13/1999	L Richardson	5	1247	Original spec for this field on the Drug Table.

Drug Claims

Output Field: **MEMBERNO**   Member Nbr

Definition: Contains an identifier which, when used in conjunction with EMPID, uniquely identifies a Medi-Cal beneficiary.

DB2 Name: MEMBER_NBR	**Type:** DataScan Core Field	**Missing Value:** None
Data Type: DECIMAL	**Display Length:** 9, 0	**Storage Length:** 5

Input Fields: **Field Name**	**Data Type**	**Length**
NEWBORN	X	1

Logic: When NEWBORN = 'Y', set MEMBERNO = 1.

When NEWBORN <> 'Y', set MEMBERNO = 0 (zero).

FOLOG Calls: OPR-#63: When NEWBORN equals yes (call FOLOG with count)

Default: Zero.

Precedents: NEWBORN

Impact: DataScan uses as a patient ID EMPID + MEMBERNO (concatenated, not added). It was decided to set MEMBERNO = 1 when NEWBORN = Y so that DataScan would build separate Cases for a mother and her newborn who is using her CIN. Without assigning them different MEMBERNOs (mother's is 0, baby's is 1), mother's and baby's hospitalizations would appear as one Case.

Tech. Notes:

Revisions: **Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
1/24/1999	L. Richardson	4	1203	Convert to functional spec.
1/20/1999	C.Swanson	4	1203	Updated FOLOG, added operation # and displayed field

Drug Claims

Output Field:	**METQTY**	Metric Qty

Definition: The number of units dispensed.

DB2 Name: METRIC_QTY	**Type:** Medi-Cal Custom Field	**Missing Value**: Null
Data Type: DECIMAL	**Display Length:** 11, 3	**Storage Length:** 6

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-UNITS	S9(8)V999	11

Logic: Set METQTY = F35-Units (when numeric)
When F35-Units is not numeric, set METQTY = NULL

FOLOG Calls: None

Default:

Precedents: None

Impact:

Tech. Notes: When METQTY is set to NULL, the NULL indicator field for METQTY is set to '-1'.

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	6/18/2002	C.Swanson	6	2811	Corrected input field length for F35-UNITS
	5/9/2002	C.Swanson	6	2811	Increased input field length of F35-UNITS
	10/5/1999	G Holliday	5	1474	Modified Short and Long Desc. fields to match EGAD.
	8/10/1999	L Richardson	5	1237	Changed the field length to S9(7)V999.
	8/4/1999	L. Richardson	5	1237	Increased the length of the field to 10 digits with 3 decimal positions.
	1/22/1999	L. Richardson	4	1162	Converted to Functional spec and added tech note.

Drug Claims

Output Field: NDC   NDC

Definition: Food and Drug Administration (FDA) registered number used to identify the manufacturer, product, and package size of the drug. The first five digits represent the manufacturer or labeler; the next four digits represent the product; and the last two digits represent the package size.   On the Compound Drug table, this is the NDC for the individual ingredient.

DB2 Name: NATL_DRUG_CODE   **Type:** Medi-Cal Custom Field   **Missing Value**: Spaces

Data Type: CHARACTER   **Display Length:** 11   **Storage Length:** 11

Input Fields: Field Name	Data Type	Length
F35-MEDICAL-SUPPLY-IND	X	1
F35-PROCEDURE-AREA	X	40
F35-PROCEDURE-INDICATOR	X	1

Logic: NDC and DRUGCODE are mutually exclusive, since DRUGCODE stores only non-NDC codes. SVCTYP is set by the same logic that assigns NDC and DRUGCODE. Therefore, all three fields are treated together in this one spec.

When the F35-PROCEDURE-CODE is 11 characters, A-Z and/or 0-9, with no spaces, no low values, and no special characters (and not selected as one of the exceptions for compound drugs or State Drug Codes), it is assumed to be an NDC. If the first four bytes of F35-PROCEDURE-AREA are low values or spaces, it is assumed to be a State drug code (or old Medi-Cal code).

Processing must occur in the following sequence first #1 then #2 to ensure that the State codes are captured correctly.

1. State and old Medi-Cal drug codes are identified as F35-PROCEDURE-AREA bytes 1 - 4 = low values or spaces)

When this is true set:

NDC = zero (missing value)
DRUGCODE = F35-PROCEDURE-AREA (bytes 5 - 11)

then set SVCTYP by the following rules:

a. SVCTYP = 157 (medical supply) when either of the following is true:

F35-PROCEDURE-AREA (bytes 5 - 9) =>9900A and <=9999Z
Note: the 9th position must be an alpha character

b. SVCTYP = 158 (State drug code) when:

F35-PROCEDURE-AREA (bytes 5 - 9) =>0000A and <=9899Z
Note: the 9th position must be an alpha character

c. Otherwise, SVCTYP = 159 (unknown drug code).

2. NDC codes are identified as F35-PROCEDURE-INDICATOR = '3' and F35-PROCEDURE-AREA has all 11 positions as characters with the values A-Z and or 0-9, and not 99999999996, and no embedded spaces, low values, or special characters.

When this is true:, the general rule is:

Drug Claims

Output Field:	**NDC**	NDC

    NDC = F35-PROCEDURE-AREA
    DRUGCODE = spaces (missing value)
    SVCTYP = 155 (NDC)

There are two exceptions that apply to the setting of SVCTYP in this case:

a. When the NDC = 99999999996 (ten 9s and a 6), set SVCTYP=156(compound drug)
b. When the F35-MEDICAL-SUPPLY-IND= Y and the f35-Procedure-Area is an NDC,
    set SVCTYP=157(medical supply)

FOLOG Calls: When either F35-PROCEDURE-AREA is not 11 characters (A-Z and/or 0-9), or F35-PROCEDURE-AREA (bytes 1-4) are not equal to low values and F35-PROCEDURE-AREA (bytes 5-9) are less than '9900A or greater than 9999Z', or F35-Medical-Supply-Ind does not equal 'Y' or F35-PROCEDURE-AREA (bytes 5-9) are less than '0000A' or greater than '9899Z' (call FOLOG)

Default: Spaces (missing value)
DRUGCODE: Spaces (missing value)
SVCTYP: Zero (missing value)

These values will be assigned when F35-PROCEDURE-AREA is all 9s or all 0s, or when bytes 1 - 4 <> low values.

Precedents: None

Impact: The NDC field is used to tag a number other fields of drug information from the Redbook reference file.

Also, NDCs are considered for inclusion in Episodes. It is important to ensure that NDC is properly set to missing when not a valid NDC so that no unnecssary attempts are not made to include the record in an Episode. The Episode build process is complex and the processing time can be affected by additional consideration of Drug claims that do not have valid NDCs in the NDC field.

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	5/9/2002	C.Swanson	6	2811	Changed input field length of procedure area to 40
	8/13/1999	L Richardson	5	823	The data type is changed to alphanumeric; logic changes wer made to support an alphanumeric validity check. FOLOG changed accordingly as well.
	6/5/1998	L Richardson	3	721	Clarified that the 9th position of State Drug codes and medic supply codes must be alpha and clarified that the med supply indicator is used with an NDC. Removed reference to the compound drug indicator as it is no longer used in the spec.
	5/28/1998	L. Richardson	3	721	Made the following logic changes: 1. Removed F35-COMPOUND-IND when assigning SVCTY 156. 2. Added use of F35-MEDICAL-SUPPLY-INDfor assigning SVCTYP 157 when an NDC is submitted.
	5/17/1998	L. Macklem	3	739	Rewrote as functional spec. In so doing: 1. Clarified logic for SVCTYP 157 (medical supply), which appears to be written incorrectly in the pseudo-code. 2. Clarified assignment of missing values.

Drug Claims

Output Field: NDC		NDC			
1/9/1998	L. Richardson	2	662	Made two changes to logic to assign SVCTYP 157 (medical supply):

1. Check that bytes 1 - 4 = low values
2. Use the medical supply indicator for drug codes outside the range 9900A - 9999Z

Drug Claims

Output Field:	**NETPAY**	Net Payment

Definition: NETPAY is the Medi-Cal reimbursement (detail-line) amount, except for capitated services where it is set to zero.

DB2 Name: NET_PAY_AMT	**Type:** DataScan Core Field	**Missing Value:** None
Data Type: DECIMAL	**Display Length:** 9, 2	**Storage Length:** 5

Input Fields:

Field Name	Data Type	Length
F35-MEDI-CAL-REIM-AMT	S9(7)V99	9
F35-PLAN-CODE	X	2

Logic: NETPAY is the Medi-Cal reimbursement amount, *except* for capitated services, where it is set to zero.

The logic is:

   When F35-PLAN-CODE = 2 (Managed Care Encounter) or 4 (COHS) or F35-MEDI-CAL-REIM-AMT not numeric,
      set NETPAY = 0.

   When F35-PLAN-CODE <> 2 (Managed Care Encounter) or 4 (COHS),
      set NETPAY (if numeric).

FOLOG Calls: OPR-#14: When F35-PLAN-CODE is not equal to a '2' or a '4' (Capitated) and F35-MEDICAL-REIM-AMT is not numeric (call FOLOG with F35-MEDICAL-REIM-AMT)

Default:

Precedents: None

Impact: Panorama View: this field is on the Drug Extract and is used to display Net Payments of the Drug records.

Tech. Notes:

Revisions:

Date	Author(s)	Phase	IR(s)	Description
1/24/1999	L. Richardson	4	1203	Convert to functional spec.
1/20/1999	C.Swanson	4	1203	Updated FOLOG, added operation # and displayed field
1/4/1999	J. Dittman	4	739	Added impact to PV.

Drug Claims

Output Field: **NETWORK**   Network

Definition: The medical plan of the eligible as reported on the eligibility extract.

DB2 Name: NETWORK_ID	**Type:** Req'd for Mgd Care Rptg	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 3	**Storage Length:** 3

Input Fields:

Field Name	Data Type	Length
F35-CIN	X	9
MBR-EMPID	X	9
MBR-ENROLLDT	DATE	10
MBR-NETWORK	X	3
SVCDATE	DATE	10

Logic: Look up NETWORK in (tag from) Eligibility, matching on:

  F35-CIN = MBR-EMPID
  SVCDATE = MBR-ENROLLDT (match only on year and month).

When an Elig-Match is found, set NETWORK = MBR-NETWORK

If there was no Elig-Match found, set NETWORK = spaces (missing).

FOLOG Calls: OPR-#56: When an Elig-Match is found but NETWORK is spaces on the Elig record (call using NETWORK) or if no Elig-Match can be found (call using 'no Elig-Match').

Default: Spaces (missing value). This is assigned when the tag fails or the NETWORK was set to missing on the ELIG record.

Precedents: SVCDATE

Impact: Panorama View: This field is a Recipient Dimension and is found on the Drug Extract. Therefore, any change to the NETWORK values or descriptions needs to be reflected in the Panorama View Catalog.

Tech. Notes:

Revisions:

Date	Author(s)	Phase	IR(s)	Description
8/11/1999	L Richardson	5	1247	Changed logic to only tag from Elig or set to missing; change FOLOG; removed PHPCODE from PRECEDENTS.
1/20/1999	C.Swanson	4	1203	Updated FOLOG, added operation # and displayed field
1/9/1999	L Richardson	4	1025	Added Effective dates to NETPROD mapping.
1/4/1999	J. Dittman	4	739	Added impact to PV.
6/2/1998	L. Macklem	3	739	Rewrote as functional spec.
12/31/1997	J. Dittman	2	435, 584	Added logic to map from NETPROD map if tag fails.

Drug Claims

Output Field: NEWBORN   Newborn Ind

Definition: Indicates the service is for a newborn using the mother's ID.

DB2 Name: NEWBORN   **Type:** Medi-Cal Custom Field   **Missing Value**: None

Data Type: CHARACTER   **Display Length:** 1   **Storage Length:** 1

Input Fields:	Field Name	Data Type	Length
	F35-BIRTHDATE	S9	8
	F35-CIN	X	9
	MBR-BIRTHDT	DATE	10
	MBR-EMPID	X	9
	MBR-ENROLLDT	DATE	4
	SVCDATE	DATE	10

Logic: The field NEWBORN was designed so that we could distinguish when a claim is for a service provided to a newborn, but the claim has on it the Mother's ID (or CIN). It is acceptable in Medicaid policy for a Newborn service to carry the Mother's ID up to 60 days. 'This field can be either 'Y' or 'N'.

Set NEWBORN = Y (and MEMBERNO = 1, since it is derived from NEWBORN) when * both * of the following conditions are true:

1. The Age calculated using the Claim record f35-Birthdate = 0. (see details below)
2. The Claim record f35-Birthdate differs from Eligibility table BIRTHDT by more than 60 days.

The second condition is intended to identify claims where the Claim record gives the newborn's birth date, but the Eligibility table gives the mother's birth date; this indicates that the newborn record is using his/her mother's CIN.

The detail logic is:
When * ALL * of the following are true:
1. The F35-BIRTHDATE is a valid date and not missing '01-01-0001'.
2. The Age calculated using the F35-BIRTHDATE = 0. (Use the same calculation found in the Field Level Specification for AGE; but instead use the F35-BIRTHDATE not the converted BIRTHDT because BIRTHDT would be the tagged BIRTHDT, which for a NEWBORN would be the Mother's date of birth)
3. The Eligibility BIRTHDT is successfully retrieved by tagging from the Eligibility table, matching on:
    Claim F35-CIN = MBR-EMPID
    Claim SVCDATE = MBR- ENROLLDT (match on year and month only)
4. The Eligibility MBR-BIRTHDT is not missing (Eligibility MBR-BIRTHDT <> '00001-01-01').
5. The Eligibility MBR-BIRTHDT is before the Claim BIRTHDT (Eligibility MBR-BIRTHDT < Claim BIRTHDT).
6. The difference in days is greater than 60 days (Claim BIRTHDT - Eligibility MBR-BIRTHDT > 60).

If NEWBORN is set to 'Y', then set the following fields using the rules below and values from the F35 Claim record.

1.   AGE = 0

2.   BIRTHDT = F35-BIRTHDATE

3. a. SEX = 1 (Male) when F35-BENE-SEX = 1 or M.

    b. SEX = 2 (Female) when F35-BENE-SEX = 2 or F.

Drug Claims

Output Field: NEWBORN   Newborn Ind

C. SEX = 0 (missing when F35-BENE-SEX <> 1, M, 2, or F.

FOLOG Calls: OPR-#25: When AGE is zero and there is a match for F35-CIN and SVCDATE on the Eligibility Table and MBR-BIRTHDT is missing (call FOLOG with F35-CIN). *** Remove this FOLOG call as it no longer serves a purpose given that we are tagging from Elig unless this is a NEWBORN. 8/13/99 (LDR)

Default: N, This is assigned when the NEWBORN does not get set to 'Y' per the rules above.

Precedents: SVCDATE

Impact:

Tech. Notes: The MEDSTAT core subroutine, CSBDIFD2, is used to calculate the difference in days.

Revisions: Date	Author(s)	Phase	IR(s)	Description
8/26/1999	L. Richardson	5	n/a	Change the Missing Rule to None - there is no value of missi for this field.
8/13/1999	L Richardson	5	1247	Changed the logic to determine NEWBORN using the F35-BIRTHDATE instead of converted BIRTHDT and changed PRECEDENTS to meet requirements of new Elig Tag logic. Remove FOLOG call OPR# 25.
1/20/1999	C.Swanson	4	1203	Updated FOLOG, added operation # and displayed field
1/7/1999	K. Key	4	1162	1) Removed duplicate reference to BIRTHDT in the Precede section. 2) Updated FOLOG with Operation Number and displayed field that corresponds to the Claims Convert Program. Also changed logic in FOLOG call to say when there is a match on the Elig. Table and birthdate is missing. 3) Clarified the detailed logic in the logic section. 4) Added Tech Note identifying the subroutine used to calculate the difference in days.
12/2/1998	K. Key	4	N/A	Changed input field type for BIRTHDT from DT to DATE.
6/5/1998	L. Macklem	3	739	Rewrote as functional spec.
2/16/1998	W. Wallace	2	748	Use Claim BIRTHDT rather than F35-BIRTH-DATE to compare to Elig BIRTHDT.

Drug Claims

Output Field:	**NTWKPROV**	Ntwk Prv Ind

Definition: NETWKPROV indicates if the servicing provider participates in the network to which the patient belongs. Only required for databases containing Managed Care data. THIS FIELD SHOULD BE HIDDEN.

DB2 Name: NTWK_PROV_IND	**Type:** Req'd for Mgd Care Rptg	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 1	**Storage Length:** 1

Input Fields:

Logic: THIS FIELD IS NOT AVAILABLE FOR MEDI-CAL AND IS HIDDEN FROM THE USER.

NTWKPROV = space (missing value).

Note: This field is required in DataScan managed care databases.

FOLOG Calls: None

Default: Space.

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	1/24/1999	L. Richardson	4	1203	Changed default to space.
	6/2/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field: NUMINGR   NUMINGR

Definition: Identifies the total number of ingredients billed for the compound drug claim.

DB2 Name: CMPND_NUM_INGRED   **Type:** Medi-Cal Custom Field   **Missing Value:** Zero

Data Type: SMALLINT   **Display Length:** 2   **Storage Length:** 2

Input Fields: Field Name	Data Type	Length
F35-COMPOUND-DRUG-NBR-INGRED	NUMERIC	2

Logic: Set to F35-COMPOUND-DRUG-NBR-INGRED (if numeric). Otherwise set to 0 (missing).

NOTE: This field will not be used until 2003 (implementation of HIPAA)

FOLOG Calls:

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions: Date	Author(s)	Phase	IR(s)	Description
7/10/2002	C.Swanson	6	2811	Corrected input field name
5/8/2002	C.Swanson	6	2811	Created field

Drug Claims

Output Field:	**OHCAMT**	OHC Amount

Definition:	The amount paid by other health coverage, excluding Medicare.

DB2 Name:	OHC_AMT	**Type:**	Medi-Cal Custom Field	**Missing Value:**	Zero
Data Type:	DECIMAL	**Display Length:**	9, 2	**Storage Length:**	5

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-OTHER-COVERAGE-AMOUNT	S9(7)V99	9
	F35-SEGMENT-COUNT	S9(04)	2

Logic: OHCAMT = F35-OTHER-COVERAGE-AMOUNT (if numeric) when F35-SEGMENT-COUNT = 1.

Note: F35-OTHER-COVERAGE-AMOUNT is a header-level field, and we must use it only once per input claim.

FOLOG Calls: OPR-#49: When F35-SEGMENT-COUNT is equal to 1 and F35-OTHER-COVERAGE-AMOUNT is not numeric (call FOLOG with F35-PLAN-CODE)

Default: Zero (missing value). This is assigned when the input field is non-numeric or low values, or F35-SEGMENT-COUNT > 1.

Precedents: LINENUM

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	5/8/2002	C.Swanson	6	2811	Changed input from LINENUM to F35-SEGMENT-COUNT
	1/20/1999	C.Swanson	4	1203	Updated FOLOG, added operation # and displayed field
	6/5/1998	L. Macklem	3	739	Rewrote as functional spec.
	12/15/1997	L. Richardson	2	553	Removed logic to set OHCAMT = 0 for capitated services.

Drug Claims

Output Field:	**OHCIND**	OHC Ind

Definition: Indicates the eligible/recipient has other health coverage, excluding Medicare. On Medical/Drug service tables, based on the 35-File field OTHER HEALTH CARE COVERAGE CODE.

DB2 Name: OHC_IND		**Type:** Medi-Cal Custom Field		**Missing Value:** Spaces
Data Type: CHARACTER		**Display Length:** 1		**Storage Length:** 1

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-OHC-CODE	X	1

Logic: OHCIND = F35-OHC-CODE.

FOLOG Calls: None

Default: None

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	6/5/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field: **ORDPHYS**	Order Phys		

Definition: The MEDSTAT Group's assigned provider number identifying the physician who ordered the prescription.

DB2 Name: ORDER_PHYS	**Type:** Medi-Cal Custom Field	**Missing Value**: Spaces
Data Type: CHARACTER	**Display Length:** 13	**Storage Length:** 13

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-PRESC-REF-PROV-NUM	X	9

Logic: Remove any leading or embedded spaces from F35-PRESC-REF-PROV-NUM prior to tagging. This will cause the field to be left-justified with spaces at the end of the field.

Tag ORDPHYS and PROVSPEC from the Provider Background table, based on the following rules using the first match found:

For non-dental claims (PGMCODE <> 0):

When F35-PRESC-REF-PROV-NUM = Prov Background MCALID, move tag fields from Prov Background to Drug Table

When F35-PRESC-REF-PROV-NUM = Prov Background PROVLIC, move tag fields from Prov Background to Drug Table

When F35-PRESC-REF-PROV-NUM = Prov Background PROVLICU, move tag fields from Prov Background to Drug Table

When F35-PRESC-REF-PROV-NUM = Prov Background PROVTAX, move tag fields from Prov Background to Drug Table

When F35-PRESC-REF-PROV-NUM (all numeric) = Prov Background PROVSSN, move tag fields from Prov Background to Drug Table

When F35-PLAN-CODE ='02' or '04' and F35-PRESC-REF-PROV-NUM = Prov Background PROVPLAN, move tag fields from Prov Background to Drug Table

For dental claims (F35-PLAN-CODE = '00'):

When F35-PRESC-REF-PROV-NUM = Prov Background PROVPLAN, move tag fields from Prov Background to Drug Table

If no match is found on any of the IDs in the Provider Background table, use F35-PRESC-REF-PROV-NUM with a hyphen/negative sign prefixed to it, e.g., ABC12345 becomes -ABC12345 and set PROVSPEC to spaces.

Note: Do not use F35-PRESC-REF-PROV-NUM if it is all spaces, zeros or low values.

Note2: See field level specs for LATCODE and LONGCODE for important information about the default value of zero.

Note3: Note: On the Claim table, PROVSPEC = F35-PROVIDER-SPECIALTY (when valid). The Drug table cannot use that field, because for Drug claims it refers to the *dispensing* provider (pharmacy/pharmacist) rather than the *ordering* physician. Therefore, the Drug table looks up the specialty

Drug Claims

Output Field:	**ORDPHYS**	Order Phys

for the ordering physician.

FOLOG Calls: OPR-#6: If no match is found between F35-PRESC-REF-PROV-NUM and the Provider File (call FOLOG with space value and count)

Default: Spaces (missing value). This is assigned if no match is found on the Provider Background table.

Precedents: None

Impact: ORDPHYS corresponds to PROVID on the Claim table, i.e., it is the unique provider ID of the treating physician. It differs, though, in being based on the rendering rather than the billing ID.

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	5/9/2002	C.Swanson	6	2811	Changed input field length of plan code to 2
	1/22/1999	L. Richardson	4	1203	Enhanced the logic and added PROVSPEC in tagging logic
	1/22/1999	L. Richardson	4	1124	removed logic to change input ID from lower case to upperc as this now occurs in the Splitter program.
	1/20/1999	C.Swanson	4	1203	Updated FOLOG, added operation # and displayed field
	8/5/1998	C. Hubbert	3	1037	Add PROVLICU to match criteria for tagging. PROVLICU i the Uncollapsed Provider License number.
	8/4/1998	C. Hubbert	3	1000	Remove any leading or embedded spaces from the Provider Number and convert lowercase to uppercase to increase tagging rate. Also added PROVPLAN to list of fields to tag
	5/15/1998	L. Macklem	2	739	Rewrote as functional spec.

Drug Claims

Output Field:	**ORDPRVTX**	Ord Taxonomy

Definition: Identifies the provider type, classification and specialization for the ordering provider.

DB2 Name: ORD_PROV_ID_TAX	**Type:** Medi-Cal Custom Field	**Missing Value:** None
Data Type: CHARACTER	**Display Length:** 10	**Storage Length:** 10

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-PRESC-REF-REND-PROV-TAXON	CHARACTER	10

Logic: IF F35-PRESC-REF-REND-PROV-TAXON is spaces or low values, set ORDPRVTX to spaces (missing)
Otherwise, move as is.

FOLOG Calls:

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/21/2003	D.Molinar	6	3043	Changed specs to eliminate the use of a map and to move values as is.
	6/6/2002	C.Swanson	6	2811	Created field. During walk-throug with State, this field was separated from the spec'ed PROVIDTX field.

Drug Claims

Output Field:	**PATTERN** Pattern

Definition: Value used in assigning a Treatment Group to a record based on an ICD-9-CM diagnosis code.

DB2 Name:	PATTERN	**Type:**	DataScan Core Field	**Missing Value:**	Spaces
Data Type:	CHARACTER	**Display Length:**	5	**Storage Length:**	5

Input Fields:	**Field Name**	**Data Type**	**Length**
	N/A	N/A	N/A

Logic: Drug Convert Logic:

Sets PATTERN to Spaces.

DATASCAN CORE Logic:

The Edit process requires valid values in the converted field DX1 for the assignment of PATTERN. Because DX1 is always missing on the Drug Claims in the Medi-Cal DSS, the MDC will always remain the default value of 0 (zero).

FOLOG Calls: None

Default: Spaces.

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/24/1999	L. Richardson	4	1203	Converted to functional spec.

Drug Claims

Output Field:	**PAY**	Payment

Definition: Gross amount of payment for the specific service. Sum of NETPAY, COB, COPAY, and DEDUCT.

DB2 Name:	PAY_AMT	**Type:**	DataScan Core Field	**Missing Value:**	None
Data Type:	DECIMAL	**Display Length:**	9, 2	**Storage Length:**	5

Input Fields:

Field Name	Data Type	Length
COB	S9(7)V99	9
COPAY	S9(7)V99	9
DEDUCT	S9(7)V99	9
NETPAY	S9(7)V99	9

Logic: PAY = NETPAY + COB + COPAY + DEDUCT

FOLOG Calls: None

Default: None. COB, COPAY, DEDUCT and NETPAY cannot be NULL, so the sum will always be non-NULL.

Precedents: COB
COPAY
DEDUCT
NETPAY

Impact: NETPAY is the only financial field set to zero for capitated services (the reported amount is stored in RPTNETMC). As a result, the PAY calculation means different things for capitated and FFS services. When including financial fields in reports or queries, it is advisable to subset on CAPIND = Y or CAPIND = missing (space).

Tech. Notes:

Revisions:

Date	Author(s)	Phase	IR(s)	Description
12/14/1998	L. Richardson	4	1162	Removed sentence about "zero for cap service" from the definition.
5/18/1998	L.. Macklem	3	739	Rewrote as functional spec.
12/15/1997	L. Richardson	2	553	Removed logic to set to zero for capitated services/prescriptions. Added COB and DEDUCT to the calculation.

Drug Claims

Output Field: PCPID	PCPID	

Definition: Provider identifcation number of the primary care physician. NOT AVAILABLE FOR MEDI-CAL. THIS FIELD SHOULD BE HIDDEN.

DB2 Name: PCP_ID	**Type:** Req'd for Mgd Care Rptg	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 13	**Storage Length:** 13

Input Fields:

Logic: PCPID = spaces (missing value).

Note: This field is required in DataScan managed care databases.

FOLOG Calls: None

Default: None. PCPID is set to missing as a constant.

Precedents: None

Impact:

Tech. Notes:

Revisions:

Date	Author(s)	Phase	IR(s)	Description
6/2/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field:	**PCPTYPE**	PCP Type

Definition: Not available for Medi-Cal. THIS FIELD SHOULD BE HIDDEN.

DB2 Name:	PCP_TYP	**Type:**	Medi-Cal Custom Field	**Missing Value:**	Spaces
Data Type:	CHARACTER	**Display Length:**	1	**Storage Length:**	1

Input Fields:	**Field Name**	**Data Type**	**Length**
	N/A		

Logic: PCPTYPE = space (missing value).

Note: This field is required in DataScan managed care databases.

FOLOG Calls: None

Default: None. PCPTYPE is set to missing as a constant.

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	6/2/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field: PDDATE	Process Date

Definition: The date of payment for the service as reported on the claim or encounter. This field reflects the Check Write Date or the Check Transfer Date. If this information is not available, the date reflects the date the database was updated with this record. For encounter records, this date reflects the date assigned by ITSD when processing the encounter data. On the Capitation table, this date is the date the capitation payment was issued (CCYY-MM-DD format).

DB2 Name: ROLLOFF_DT	**Type:** DataScan Core Field	**Missing Value:** 0001-01-01
Data Type: DATE	**Display Length:** 10	**Storage Length:** 4

Input Fields: Field Name	Data Type	Length
F35-CHECK-DATE	S9	8
SVCDATE	DATE	10

Logic: This logic assigns these fields:

    PDDATE
    PDDATEMM
    PDDATEYY

Set PDDATE = F35-CHECK-DATE (if valid date) unless F35-CHECK-DATE is less than SVCDATE. If the F35-CHECK-DATE is less than SVCDATE then move SVCDATE to PDDATE.

PDDATEMM = month portion (1 - 12) of PDDATE as set above.
PDDATEYY = year portion (CCYY) of PDDATE as set above.

Note: For field specific drop criteria (e.g., invalid F35-CHECK-DATE) see the Splitter Specifications.

Note2: The reason we are setting PDDATE to SVCDATE when the F35-Check-Date is less than SVCDATE is because the update process will not roll records off correctly when PDDATE is prior to the date the service was rendered. Because the Splitter drops records outside the paid range and drops records with a service date after the paid range, setting the PDDATE to the SVCDATE is okay and works.

FOLOG Calls: OPR-#73: When the Claim is paid before the Service Date (call FOLOG with F35=-CHECK-DATE)

Default: None. PDDATE must be a valid date.

Precedents: SVCDATE

Impact: PDDATE is a critical field. Its major uses include:

1. Criterion for rolling off data antecedent to the 30-month database window.
2. Defining the Paid view in the DataScan application.

PDDATE is used in the Statistical Report Heading as the build range (min/max, not missing).

Panorama View: PDDATE is on the Drug Extract and is used, along with SVCDATE, to calculate the Payment Lag.

Tech. Notes: Use copybook CCCPDDT to determine PDDATE using F35-CHECK-DATE

This field is Y2K compliant as of Phase 5.

Drug Claims

Output Field:	**PDDATE**			Process Date

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	8/6/1999	L. Richardson	5	1237	Changed input length to 8, removed logic that set the centur to '19', and removed 'non Y2K' compliant references.
	1/22/1999	L. Richardson	4	1203	Put century calculation in the Logic section. Add a note to logic that because the splitter drops records outside the paid range and records with a service date after the paid range, setting the PDDATE to the SVCDATE is okay and works. Add to the Impact Section that this is used in the Statistical Report Heading as the build range (min/max, not missing). Add tech note about this field NOT being Y2K compliant.
	1/21/1999	C.Swanson	4	1142	Removed FOLOG call when PDDATE was more than 4 months prior to the most recent month in the update for PV
	1/20/1999	C.Swanson	4	1203	Updated FOLOG, added operation # and displayed field
	1/7/1999	T. Poyner	4	1210	Changed date format from YYYYMMDD to CCYYMMDD description.
	1/6/1999	L. Richardson	4	1142	Removed logic that set PDDATE to TAPEDT when 4 mont older than the update month.
	1/4/1999	J. Dittman	4	739	Added / modified impact to PV.
	7/14/1998	L. Richardson	3	1013	Revised the spec so that the PDDATE is set to the Service I when the Service Date is greater than the Check-Date; also added a call to FOLOG to track occurrences of PDDATE wh set to SVCDATE.
	6/30/1998	L. Richardson	3	723	Added logic that set PDDATE to TAPEDT when 4 months older than the update month.
	6/1/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field:	**PDDATEMM**	Process Mnth

Definition: The month of the check date for the claim or the date the encounter was processed by DHS (MM format).

DB2 Name: PD_DATE_MM	**Type:** DataScan Core Field	**Missing Value:** Zero
Data Type: SMALLINT	**Display Length:** 5	**Storage Length:** 2

Input Fields:

Logic: See PDDATE.

FOLOG Calls:

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	9/22/1998	L Richardson	3	895	This field is added per the IR - to be consistent with the Clair Table

Drug Claims

Output Field:	**PDDATEYY**	Process Year			

Definition: The year of the check date for the claim or the date the encounter was processed by DHS (CCYY format).

DB2 Name: PD_DATE_YYYY		**Type:** DataScan Core Field		**Missing Value**: Zero
Data Type: SMALLINT	**Display Length:** 5			**Storage Length:** 2

Input Fields:

Logic: See PDDATE.

FOLOG Calls:

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	1/7/1999	T. Poyner	4	1210	Changed date format from YYYYMMDD to CCYYMMDD description.
	9/22/1998	L Richardson	3	895	Added this field per the IR - to be consistent with the Claims Table

Drug Claims

Output Field: **PERSNBR**	Person Nbr

Definition: A view of the last 2 bytes of the CASENUM field that represents the person number associated with the family case number.

DB2 Name: PERSNBR	**Type:** Medi-Cal Custom Field	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 2	**Storage Length:** 2

Input Fields: **Field Name**	**Data Type**	**Length**
CASENUM	CHARACTER	10

Logic: PERSNBR = the last 2 bytes of the CASENUM

FOLOG Calls:

Default: Spaces when CASENUM is set to spaces.

Precedents: CASENUM

Impact:

Tech. Notes:

Revisions: **Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
8/6/2002	C.Swanson	6	2811	Removed reference to PERSNBR being a "view" of the CASENUM. PERSNBR will now be a separate field.
10/8/1999	L. Richardson	5	1257	Added to the table.

Drug Claims

Output Field:	**PGMCODE** Program Code

Definition: Indicates the Medi-Cal program code to which this service is reported. Based on the 35-File field PLAN CODE.

DB2 Name:	PGM_CODE	**Type:**	Medi-Cal Custom Field	**Missing Value:**	-1
Data Type:	DECIMAL	**Display Length:**	4, 0	**Storage Length:**	3

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-PLAN-CODE	X	2

Logic: PGMCODE = F35-PLAN-CODE when valid.

Valid values are: 00, 01, 02, 03, 04, 05, 06, 08, 09.

FOLOG Calls: When RF35-PLAN-CODE does not equal '00' through '09' excluding '07'.

Default: Zero (missing value). This is assigned when F35-PLAN-CODE is not a valid value.

Precedents: None

Impact: This field is used in Panorama View v2.0 to prevent capitated services (where PGMCODE = 2-GMC/Two-Plan or 4-COHS) from being completed.

Tech. Notes: During the unloads of the production tables for the implementation of SDN 6043, the current values in the PGMCODE field will have to be zero-filled to account for the increase in the input field length.

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	8/8/2002	C.Swanson	6	2811	Changed display length to 4 (storage of 3) to account for the leading zeros during the unload for the SDN 6043 implementation.
	8/5/2002	D. Molinar	6	2811	Excluded '07' from FOLOG Calls.
	5/8/2002	C.Swanson	6	2811	Changed input field length to 2 from 1
	1/4/1999	J. Dittman	4	739	Added impact to PV.
	12/8/1998	K. Key	4	N/A	In order to match the EGAD table, modified the missing rule be -1 instead of zero.
	6/5/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field: PHPCODE   PHPCODE

Definition: The 3-digit Prepaid Health Plan code (PHP) reported on the claim or encounter or financial report.

DB2 Name: PHP_CODE   **Type:** Medi-Cal Custom Field   **Missing Value:** Spaces

Data Type: CHARACTER   **Display Length:** 3   **Storage Length:** 3

Input Fields:	Field Name	Data Type	Length
	F35-PHP-CODE	X	3
	SVCDATE	DATE	

Logic: Validate F35-PHP-CODE on the NetProd map, matching on:

> F35-PHP-CODE = NetProd PHP CODE
>   and SVCDATE => NetProd From Effective Date and <= NetProd Thru Effective Date

If F35-PHP-CODE can not be found on the NetProd map set PHPCODE to Three Zeros, '000'.

FOLOG Calls: OPR-#26: When F35-PLAN-CODE is equal to 07 or alphabetic (call FOLOG with F35-PLAN-CODE)

Default: Three Zeros ' 000' (FFS). This is assigned when F35-PHP-CODE is not a valid value found on the map.

Precedents: SVCDATE

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	1/31/2000	L. Richardson	5	1850	Changed the default value to be zeros '000' for FFS.
	1/24/1999	L. Richardson	4	1203	Added logic stating PHPCODE = Spaces if not matched on the NetProd map.
	1/20/1999	C.Swanson	4	1203	Updated FOLOG, added operation # and displayed field
	1/9/1999	L Richardson	4	1025	Added Effective dates to NETPROD mapping and added SVCDATE as precedent.
	6/5/1998	L. Macklem	3	739	Rewrote as functional spec.
	12/17/1997	J. Dittman	2	557	Added validation on the NETPROD map.

Drug Claims

Output Field:	**PLACE**	Place of Svc

Definition:	The MEDSTAT Group's standard place of service code.

DB2 Name: PLACE_CD	**Type:** Medi-Cal Custom Field	**Missing Value:** Zero
Data Type: SMALLINT	**Display Length:** 5	**Storage Length:** 2

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-MIO-POS	X	1

Logic: When F35-MIO-POS is not low-values, set PLACE to the corresponding MEDSTAT standard PLACE on the PLACdrug map.

FOLOG Calls: None

Default: Zero (missing value). This is assigned when the input value is low-values or is not found on the map.

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/25/1999	J. Dittman	4	739	Converted to functional spec.

Drug Claims

Output Field:	**PRODCAT**	Product Cat

Definition:	Distinguishes prescription from OTC products, as well as identifying trade-name status and products of repackagers.

DB2 Name: PROD_CAT_CODE	**Type**: Medi-Cal Custom Field	**Missing Value**: Zero
Data Type: DECIMAL	**Display Length**: 2, 0	**Storage Length**: 2

Input Fields:	**Field Name**	**Data Type**	**Length**
	NDC	X	11

Logic: Drug Convert Logic:

Sets PRODCAT = Zero.

DataScan Core Logic:

PRODCAT is tagged from PRODCAT from the Redbook File when the NDC is found.

If the NDC is not found, PRODCAT remains zero.

FOLOG Calls:

Default: Zero

Precedents:

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	10/5/1999	G Holliday	5	1474	Modified Short and Long Desc. fields to match EGAD.
	8/4/1999	L. Richardson	5	823	Added as a new field to the Drug Table.

Drug Claims

Output Field:	**PRODUCT**	Plan Mdl Typ

Definition: The Medical Plan Model Type associated with the eligible/recipient. Note: The Medical Plan Model Type for enrollees will reflect the enrolled model type (e.g., Geographic Managed Care), even if a particular service was paid fee-for-service (e.g., carved out services). To identify fee-for-service claims for managed care enrollees, see Medi-Cal Program Code (PGMCODE).

DB2 Name: PRODUCT	**Type:** Req'd for Mgd Care Rptg	**Missing Value:** Zero
Data Type: DECIMAL	**Display Length:** 2, 0	**Storage Length:** 2

Input Fields:

Field Name	Data Type	Length
F35-CIN	X	9
MBR-EMPID	X	9
MBR-ENROLLDT	DATE	10
MBR-PRODUCT	DECIMAL	2
SVCDATE	DATE	10

Logic: PRODUCT is tagged from Eligibility or set to missing.

1. Look up PRODUCT in (tag from) Eligibility, matching on:

    F35-CIN = MBR-EMPID
    SVCDATE = MBR-ENROLLDT (match only on year and month).

   When an Elig-Match is found set PRODUCT = MBR-PRODUCT.

2. If no Elig-Match can be found, set PRODUCT = zero (missing).

FOLOG Calls: OPR-#57: When an Elig-Match is found and PRODUCT is missing on the Elig record (call FOLOG).

Default: Zero (missing value). This is assigned if no Elig-Match is found or if missing on the Elig record.

Precedents: SVCDATE

Impact: Panorama View: although this field is not actually extracted, the descriptions are a roll-up dimension (Plan Model Type) in Panorama View. Therefore, any change to PRODUCT values or descriptions needs to be reflected in the Panorama View Catalog.

Tech. Notes:

Revisions:

Date	Author(s)	Phase	IR(s)	Description
8/11/1999	L Richardson	5	1247	Changed logic to only tag from Elig or set to missing; change FOLOG call.
1/22/1999	L. Richardson	4	1203	Enhance the mapping instructions for clarity.
1/20/1999	C.Swanson	4	1203	Updated FOLOG, added operation # and displayed field
1/9/1999	L Richardson	4	1025	Added Effective dates to NETPROD mapping.
1/4/1999	J. Dittman	4	739	Added impact to PV.
6/2/1998	L. Macklem	3	739	Rewrote as functional spec.
1/12/1998	L. Richardson	2	584	Resolved unsatisfied Else clause.
12/31/1997	J. Dittman	2	435, 584	Always map from NETWORK.

Drug Claims

Output Field: PROVCNTY   Prov Cnty

Definition: The county of the billing provider's servicing address. On the Capitation Table, this represents the eligibility county.

DB2 Name: PROVIDER_CNTY	**Type:** Medi-Cal Custom Field	**Missing Value:** Zero
Data Type: DECIMAL	**Display Length:** 2, 0	**Storage Length:** 2

Input Fields:

Field Name	Data Type	Length
F35-PLAN-CODE	X	2
F35-PROVIDER-COUNTY	X	2

Logic: Apply the following rules:

1. PROVCNTY = F35-PROVIDER-COUNTY when *either* of the following is true:

    F35-PROVIDER-COUNTY = 01 - 58 (valid CA county codes)
    F35-PROVIDER-COUNTY = 99 (out of state).

2. Recode F35-PROVIDER-COUNTY when F35-PLAN-CODE = 05 (CHDP) as follows:

    59 -> 1   (Berkeley -> Alameda County)
    62 -> 19   (Long Beach -> Los Angeles County)
    63 -> 19   (Pasadena -> Los Angeles County)

3. PROVCNTY = 98 (invalid value) when F35-PROVIDER-COUNTY is numeric but <> 00 - 59, 62 - 63 or 99.

FOLOG Calls: OPR-#59: When F35-PROVIDER-COUNTY is numeric and not '00' through '59', '62', '63', or '99' and F35-PLAN-CODE is equal to '5' (call FOLOG with F35-PROVIDER-COUNTY)

OPR-#59: When F35-PROVIDER-COUNTY is numeric and not '00' through '58', or '99' and F35-PLAN-CODE is not equal to '5' (call FOLOG with F35-PROVIDER-COUNTY)

OPR-#59: When F35-PROVIDER-COUNTY is equal to '00' or is not numeric and not '01' through '58', or '99'(call FOLOG with F35-PROVIDER-COUNTY)

Default: Zero (missing value). This is assigned when F35-PROVIDER-COUNTY is non-numeric. Note that 00 is also a possible input value.

Precedents: None

Impact: Panorama View: this field is a Provider Dimension and is found on the Drug Extract. Therefore, any change in PROVCNTY values or descriptions needs to be reflected in the Panorama View Catalog.

Tech. Notes:

Revisions:

Date	Author(s)	Phase	IR(s)	Description
5/9/2002	C.Swanson	6	2811	Changed input field length of plan code to 2
8/1/2001	D. Boorse	6	2232	Change FOLOG Calls to reflect new OP# of 59. Previous code of 46.
1/21/1999	K. Key	4	1196	In definition, delete the term 'as reported on the service table
1/20/1999	C.Swanson	4	1203	Updated FOLOG, added operation # and displayed field
1/4/1999	J. Dittman	4	739	Added impact to PV.

Drug Claims

Output Field: PROVCNTY   Prov Cnty

11/16/1998	K. Key	4	1203	Corrected spelling of "Lof Angeles" in the logic.
6/5/1998	L. Macklem	3	739	Rewrote as functional spec. In so doing, made wording consistent with Claim spec.
1/8/1998	L. Richardson	2	659	Added recoding for input value 63 (Pasadena).
12/31/1997	J. Dittman	2	566	Added validation of input value. Added recoding of input values 59 and 62 (Berkeley and Long Beach).

Drug Claims

| Output Field: | **PROVID** | ID: Provider |

Definition: The MEDSTAT Group's assigned unique identification number for the provider of service, based on the billing provider.

| **DB2 Name:** PROV_ID | **Type:** DataScan Core Field | **Missing Value:** Spaces |
| **Data Type:** CHARACTER | **Display Length:** 13 | **Storage Length:** 13 |

Input Fields:

Field Name	Data Type	Length
F35-PLAN-CODE	X	2
F35-PROVIDER-NUMBER	X	9

Logic: Remove any leading or embedded spaces from F35-PROVIDER-NUMBER prior to tagging. This will cause the field to be left-justified with spaces at the end of the field.

Tag PROVID, LATCODE, LONGCODE, PROVIDBL from the Provider Background table, based on the following rules using the first match found:

For non-dental claims (F35-PLAN-CODE <> '0'):

When F35-PROVIDER-NUMBER = Prov Background MCALID, move tag fields from Prov Background to Drug Table

When F35-PROVIDER-NUMBER = Prov Background PROVLIC, move tag fields from Prov Background to Drug Table

When F35-PROVIDER-NUMBER = Prov Background PROVLICU, move tag fields from Prov Background to Drug Table

When F35-PROVIDER-NUMBER = Prov Background PROVTAX, move tag fields from Prov Background to Drug Table

When F35-PROVIDER-NUMBER (all numeric) = Prov Background PROVSSN, move tag fields from Prov Background to Drug Table

When F35-PLAN-CODE = '2' or '4' and F35-PROVIDER-NUMBER = Prov Background PROVPLAN, move tag fields from Prov Background to Drug Table

For dental claims (F35-PLAN-CODE = '0'):

When F35-PROVIDER-NUMBER = Prov Background PROVPLAN, move tag fields from Prov Background to Drug Table

If no match is found on any of the IDs in the Provider Background table, use F35-PROVIDER-NUMBER with a hyphen/negative sign prefixed to it, e.g., ABC12345 becomes -ABC12345 and set tag fields (LATCODE, LONGCODE, and PROVZIPB) to zero.

Note: Do not use F35-PROVIDER-NUMBER if it is all spaces, zeros or low values.

Note2: See field level specs for LATCODE and LONGCODE for important information about the default value of zero.

FOLOG Calls:

Drug Claims

| Output Field: **PROVID** | ID: Provider |

Default: Spaces (missing value). This is assigned when the input field is all spaces, 0s or low values.

Precedents:

Impact: Panorama View: this field is extracted and used, along with PROVSPEC, PROVCNTY, and VENDORCD, to count the number of unique providers.

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	5/1/2000	T. Poyner	5	1864	Removed FOLOG OPR-#16: When there is not match for F PROVIDER-NUMBER on the provider file (call FOLOG wi F35-PROVIDER-NUMBER). This call made excessive page print on the FOLOG report and was not being evaluated.
	1/22/1999	L. Richardson	4	1203	Updated tag logic, added f35-plan-code in the logic, and add all tagged fields.
	1/22/1999	L. Richardson	4	1124	removed logic to set input ID to upper case, this is now done the Splitter.
	1/20/1999	C.Swanson	4	1203	Updated FOLOG, added operation # and displayed field
	1/10/1999	J. Dittman	4	739	Added impact to PV.
	8/5/1998	C. Hubbert	3	1037	Add PROVLICU to match criteria for tagging. PROVLICU i the Uncollapsed Provider License number.
	8/4/1998	C. Hubbert	3	1000	Remove any leading or embedded spaces from the Provider Number and convert lowercase to uppercase to increase tagging rate. Also added PROVPLAN to list of fields to tag
	5/15/1998	L. Macklem	3	739	Rewrote as functional spec, and clarified that we try to matc on any of four IDs on the Provider Background table.
	1/2/1998	L. Richardson	2	632	If all the tags fail, move input field with prefixed hyphen/negative sign.

Drug Claims

Output Field: PROVIDBL   Bill Provid

Definition: A number identifying the provider who billed for this service as it appears on the claim or encounter.

DB2 Name: PROV_ID_BILL   **Type:** Medi-Cal Custom Field   **Missing Value:** Spaces

Data Type: CHARACTER   **Display Length:** 9   **Storage Length:** 9

Input Fields:	Field Name	Data Type	Length
	F35-PROVIDER-NUMBER	X	9

Logic: PROVIDBL = F35-PROVIDER-NUMBER.

FOLOG Calls: None

Default: None. The input field is always moved as is.

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	6/8/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field:	**PROVIDRE**	Render Prov	

Definition: The provider number of the referring or prescribing provider as received on the claim. On Drug claims this is the Prescribing Provider. On Inpatient Claims this is the Admitting Provider. On Outpatient, Physician, and Vision claims, this is the Rendering Provider. On Long Term Care Claims, this is the Referring Provider.

DB2 Name: PROV_ID_RENDER	**Type:** Medi-Cal Custom Field	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 9	**Storage Length:** 9

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-PRESC-REFREND-PROV-NUM	X	9

Logic: PROVIDRE = F35-PRESC-REFREND-PROV-NUM

FOLOG Calls: None

Default: None. The input value is always moved as is.

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	6/30/2002	C.Swanson	6	2811	Corrected input field name
	6/8/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field: **PROVIDTX**	Taxonomy

Definition: Identifies the provider type, classification and specialization for the billing provider.

DB2 Name: PROV_ID_TAX	**Type:** Medi-Cal Custom Field	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 10	**Storage Length:** 10

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-BILLING-PROVIDER-TAXONOMY	CHARACTER	10

Logic: IF F35-BILLING-PROVIDER-TAXONOMY is spaces or low values, set PROVIDTX to spaces (missing) otherwise move as is.

FOLOG Calls:

Default: Spaces

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/21/2003	D.Molinar	6	3043	Changed specs to eliminate the use of a map and to move as
	6/6/2002	C.Swanson	6	2811	Changed input field to F35-BILLING-PROVIDER-TAXONOMY based on feedback from walk-through with State.
	5/6/2002	C.Swanson	6	2811	Created Field

Drug Claims

| **Output Field:** | **PROVSPEC** | Prov Spec |

Definition: Identifies the reported area of specialization for the rendering provider, as reported on the 35-File Provider/Physician or Dental Specialty field. For pharmacy claims, this represents the specialty of prescribing physician. For dental claims, the user will have to subset on Dental.

| **DB2 Name:** PROV_SPEC | **Type:** Medi-Cal Custom Field | **Missing Value:** Spaces |
| **Data Type:** CHARACTER | **Display Length:** 2 | **Storage Length:** 2 |

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-PLAN-CODE	X	2
	F35-PRESC-REF-PROV-NUM	X	9

Logic: See ORDPHYS for logic that sets PROVSPEC for the Drug Table.

Note: On the Claim table, PROVSPEC = F35-PROVIDER-SPECIALTY (when valid). The Drug table cannot use that field, because for Drug claims it refers to the *dispensing* provider (pharmacy/pharmacist) rather than the *ordering* physician. Therefore, the Drug table looks up the specialty for the ordering physician.

FOLOG Calls: None

Default: Spaces (missing value). This is assigned when there is no match on the Provider Background table.

Precedents: None

Impact: Panorama View: this field is a Provider Dimension and is found on the Drug Extract. Therefore, any change to the PROVSPEC values or dimensions needs to be reflected in the Panorama View Catalog.

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	5/9/2002	C.Swanson	6	2811	Changed input field length of plan code to 2
	1/22/1999	L. Richardson	4	1203	Move the logic to ORDPHYS as these fields are tagged at the same time.
	1/20/1999	C.Swanson	4	1203	Removed documentation for FOLOG call - does not exist in convert program
	1/4/1999	J. Dittman	4	739	Updated impact to PV.
	8/6/1998	C. Hubbert	3	1000	Added PROVPLAN as one of the provider identifier fields to tag on.
	8/5/1998	C. Hubbert	3	1037	Add PROVLICU to match criteria for tagging. PROVLICU is the Uncollapsed Provider License number.
	5/15/1998	L. Macklem	2	739	Rewrote as functional spec.

Drug Claims

Output Field:	**PROVZIP**	Zip: Providr	

Definition: The 5 digit zip code of the Billing Provider's servicing address.

DB2 Name: PROV_ZIP_CD	**Type:** DataScan Core Field	**Missing Value:** Zero
Data Type: INTEGER	**Display Length:** 5	**Storage Length:** 4

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-PROVIDER-ZIP-CODE	X	9

Logic: PROVZIP = F35-PROVIDER-ZIP-CODE *bytes 1 - 5* (if numeric and not low values).

If F35-PROVIDER-ZIP-CODE *bytes 1 - 5* not numeric or is low values set PROVZIP = 0 (zero).

FOLOG Calls: OPR-#17: When F35-PROVIDER-ZIP (bytes 1-5) is not numeric or is low-value (call FOLOG with F35-PROVIDER-ZIP-CODE)

Default: 0 (missing value). This will be assigned if the input field is non-numeric or low values in bytes 1 - 5.

Precedents: NONE

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/24/1999	L. Richardson	4	1203	Added ' and not low values' to the logic' and set to zero condition.
	1/20/1999	C.Swanson	4	1203	Updated FOLOG call, added operation # and displayed field
	6/1/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field: PROVZIPB	Bill Zip

Definition: The zip code of the Billing Provider's 'pay-to' address.

DB2 Name: PROV_ZIP_BILL	**Type:** Medi-Cal Custom Field	**Missing Value:** Zero
Data Type: INTEGER	**Display Length:** 9	**Storage Length:** 4

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-PROVIDER-NUMBER	X	9

Logic: PROVZIPB is set during the tagging of PROVID. See PROVID.

FOLOG Calls: OPR-#28: When no match is found for PROVZIPB based on F35-PROVIDER-NUMBER (billing provider) (call FOLOG with F35-PROVIDER-NUMBER)

Default: Zero (missing value). This is assigned if the tag fails.

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/22/1999	L. Richardson	4	1203	Indicated all the tagging logic resides under PROVID.
	1/20/1999	C.Swanson	4	1203	Updated FOLOG call, added operation # and displayed field
	8/6/1998	C. Hubbert	3	1000	Added PROVPLAN as one of the provider identifier fields to tag on.
	8/5/1998	C. Hubbert	3	1037	Add PROVLICU to match criteria for tagging. PROVLICU i the Uncollapsed Provider License number.
	6/8/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field: **RECCOUNT**	Record Count

Definition: RECCOUNT is a constant value of 1 (one) for ease of record counting.

DB2 Name: RECORD_COUNT	**Type:** Medi-Cal Custom Field	**Missing Value:** None
Data Type: DECIMAL	**Display Length:** 1, 0	**Storage Length:** 1

Input Fields:

Logic: RECCOUNT = 1

FOLOG Calls: None

Default: 1

Precedents: None

Impact:

Tech. Notes: This field has been added to the V_ALL_* views for the specified tables and is not an actual field on the DB2 tables.

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	11/13/1998	K. Key	3	N/A	New Field.

Drug Claims

Output Field:	**RECORDID**	Record ID

Definition: Unique Record Identification Number unique to each claim. All detail records associated with a claim will have the same RECORDID. On the Compound Drug table, RECORDID will link the individual ingredients back to the Drug Table.

DB2 Name: RECORD_ID	**Type:** Medi-Cal Custom Field	**Missing Value**: Zero
Data Type: DECIMAL	**Display Length:** 15, 0	**Storage Length:** 8

Input Fields:	Field Name	Data Type	Length
	F35-RECORD-IDENTIFICATION-NBR	DECIMAL	15

Logic: This field is set during the Splitter Program and copied to each individual Compound Drug record.

Set RECORDID = F35-RECORD-IDENTIFICATION-NUMBER

FOLOG Calls:

Default: None - this field should always be populated.

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	6/3/2002	C.Swanson	6	2811	Created field. Originally spec'ed this field as CMPNDNUM o the Drug and Compound Drug tables only.

Drug Claims

Output Field:	**REFILL**	Refill Code		

Definition: Currently not applied to Medi-Cal claims and encounters. THIS FIELD SHOULD BE HIDDEN.

DB2 Name:	REFILL_CODE	**Type:**	Medi-Cal Custom Field	**Missing Value:** -1
Data Type:	DECIMAL	**Display Length:**	3, 0	**Storage Length:** 2

Input Fields:	**Field Name**	**Data Type**	**Length**
	N/A	N/A	N/A

Logic: Set REFILL to missing.

FOLOG Calls: None

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions:

Drug Claims

Output Field: REFILLNM   Refill Num

Definition: Indicates the refill number of the prescription

DB2 Name: REFILL_NUMBER   **Type:** Medi-Cal Custom Field   **Missing Value:** Zero

Data Type: SMALLINT   **Display Length:** 2   **Storage Length:** 2

Input Fields:	Field Name	Data Type	Length
	F35-DRUG-REFILL-NUMBER	INTEGER	2

Logic: Set to F35-DRUG-REFILL-NUMBER (if numeric).
Otherwise set to 0 (missing)

FOLOG Calls:

Default: Zero

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	5/8/2002	C.Swanson	6	2811	Created field

Drug Claims

Output Field:	**RESCNTY**	Res County

Definition: The county in which the Medi-Cal eligible resides.

DB2 Name: RES_CNTY_CD	**Type:** Medi-Cal Custom Field	**Missing Value:** Zero
Data Type: DECIMAL	**Display Length:** 2, 0	**Storage Length:** 2

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-CIN	X	9
	MBR-EMPID	X	12
	MBR-ENROLLDT	DATE	10
	MBR-RESCNTY	DECIMAL	2
	SVCDATE	DATE	10

Logic: Look up RESCNTY in (tag from) the Eligibility table, matching on:

    F35-CIN = MBR-EMPID
    SVCDATE = MBR-ENROLDT (match only on year and month).

When an Elig-Match is found, set RESCNTY = MBR-RESCNTY from the Eligibility Table.

If no Eligi-Match is found, set RESCNTY = 0 (missing).

FOLOG Calls:

Default: Zero.

Precedents: SVCDATE.

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	8/12/1999	L Richardson	5	1052	Original RESCNTY Spec added to the Drug Table Design.

Drug Claims

Output Field:	**RPTNETMC**	Rptd NetPay	

Definition: The amount reported in the 35-File MEDI-CAL-REIM-AMT field on a capitated plan encounter record. This is not the actual Medi-Cal net payment amount and is, therefore, reported separately.

DB2 Name:	RPTD_NET_PAY_MC	**Type:**	Medi-Cal Custom Field	**Missing Value:**	Zero
Data Type:	DECIMAL	**Display Length:** 9, 2		**Storage Length:** 5	

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-MEDI-CAL-REIM-AMT	S9(7)V99	9
	F35-PLAN-CODE	X	2

Logic: RPTNETMC = F35-MEDI-CAL-REIM-AMT (if numeric) when service is capitated, i.e., F35-PLAN-CODE is *either*:

   02 (Managed Care Encounter)
   04 (COHS)

Note: This is the same criterion for setting CAPIND = Y, so when and only when CAPIND = Y, RPTNETMC is non-zero.

FOLOG Calls: OPR-#50: When F35-PLAN-CODE is equal to '2' or '4' (Capitated) and F35-MEDICAL-REIM-AMT is not numeric (call FOLOG with F35-MEDICAL-REIM-AMT)

Default: Zero. This is assigned when F35-PLAN-CODE is any value other than 2 or 4 (including missing), and when F35-MEDI-CAL-REIM-AMT is non-numeric.

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	5/9/2002	C.Swanson	6	2811	Changed input field length of plan code to 2
	1/20/1999	C.Swanson	4	1203	Updated FOLOG call, added operation # and displayed field
	6/8/1998	L. Macklem	3	739	Rewrote as functional spec.
	1/8/1998	L. Richardson	2	648	Removed the word "rounded."
	12/15/1997	L. Richardson	2	553	Added field to carry the net payment amount for capitated services.

Drug Claims

Output Field: RXCNT   Rx Count

Definition: On prescription drug claims, the number 1 or -1. For a negative adjustement the value will be -1.

DB2 Name: RX_COUNT	**Type:** Medi-Cal Custom Field	**Missing Value:** Zero
Data Type: SMALLINT	**Display Length:** 5	**Storage Length:** 2

Input Fields:

Field Name	Data Type	Length
F35-ADJUSTMENT-INDICATOR	X	1

Logic: RXCNT = -1 when F35-ADJUSTMENT-INDICATOR = 3 or 5 (Negative adjustment values)

RXCNT = 0 when F35-ADJUSTMENT-INDICATOR = 1 or 2 (Supplemental adjustments) .

RXCNT = 1 for all other values of F35-ADJUSTMENT-INDICATOR.

FOLOG Calls: None

Default: None. The logic covers all cases.

Precedents: None

Impact: Panorama View: this field is found on the Drug Extract and is used to count the number of prescriptions.

Tech. Notes:

Revisions:

Date	Author(s)	Phase	IR(s)	Description
1/4/1999	J. Dittman	4	739	Added impact to PV.
6/5/1998	L Richardson	3	725	Revised the spec to account for supplemental adjustments m accurately. Revised the spec to account for supplemental adjustments m accurately. Now supplemental adjustments will not be considered a new or additional prescription.
5/15/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field:	**RXNUMBER**	Rx Number

Definition: The prescription number as reported on the claim.

DB2 Name: RX_NUMBER	**Type:** Medi-Cal Custom Field	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 8	**Storage Length:** 8

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-PRESCRIPTION-NUMBER	X	8

Logic: If F35-PRESCRIPTION-NUMBER is not equal to spaces, low-values, 9's, or zeroes, then set RXNUMBER to F35-PRESCRIPTION-NUMBER. Otherwise, set RXNUMBER to missing.

FOLOG Calls: None

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/25/1999	K. Key	4	1203	Converted to functional spec.

Drug Claims

Output Field:	**SALESTAX**	Sales Tax

Definition: Currently not applied to Medi-Cal. THIS FIELD SHOULD BE HIDDEN.

DB2 Name: SALES_TAX	**Type:** Medi-Cal Custom Field	**Missing Value:** None
Data Type: DECIMAL	**Display Length:** 9, 2	**Storage Length:** 5

Input Fields:	**Field Name**	**Data Type**	**Length**
	N/A	N/A	N/A

Logic: Set SALESTAX = 0 (zero).

FOLOG Calls: None

Default: Zero.

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/24/1999	L. Richardson	4	1203	Converted to functional spec.

Drug Claims

Output Field: SEX   Sex

Definition: The gender of the eligible/recipient.

DB2 Name: SEX_CD   **Type:** DataScan Core Field   **Missing Value:** Zero

Data Type: DECIMAL   **Display Length:** 1, 0   **Storage Length:** 1

Input Fields:

Field Name	Data Type	Length
F35-BENE-SEX	X	1
F35-CIN	X	9
MBR-EMPID	X	9
MBR-ENROLLDT	DATE	10
MBR-SEX	DECIMAL	1
NEWBORN	X	1
SVCDATE	DATE	4

Logic: Tag SEX from Eligibility, but only if NEWBORN <> Y (same as MEMBERNO = 0), i.e., ensuring this is not a newborn record using his/her mother's CIN. If no Elig-Match can be found then set SEX = zero (missing), if this is newborn record set SEX = F35-BENE-SEX (if valid).

In detail, apply these rules in order:

1. Look up SEX in (tag from) Eligibility, matching on *both* the following, but only when NEWBORN <> Y:

    F35-CIN = MBR-EMPID
    SVCDATE = MBR-ENROLLDT (match on year and month only).

When an Elig-Match is found, set SEX = MBR-SEX.

2. If no Elig-Match can be found; set SEX = zero (missing).

3. If NEWBORN = 'Y' then convert using these rules:

    a. SEX = 1 (Male) when F35-BENE-SEX = 1 or M.

    b. SEX = 2 (Female) when F35-BENE-SEX = 2 or F.

    C. SEX = 0 (missing) if not A or B.

FOLOG Calls: OPR-#18: When NEWBORN is 'N' and an Elig-Match is found and MBR-SEX is missing (Call FOLOG)

OPR-#58: When F35-BENE-SEX is not equal to 'M', '1', 'F', or '2' and NEWBORN is equal to 'Y' (call FOLOG with NEWBORN)

Default: Zero (missing value). Assigned when Elig tag fails of if NEWBORN = 'Y' but no valid input value for F35-BENE-SEX.

Precedents: NEWBORN, SVCDATE

Impact: SEX is a key analytical field. It is used in many studies, and AGE-SEX adjustment is a basic adjustment methodology. It is used in the assignment of COHORT and HEDISCOH, and also for certain MDCs.

Panorama View: this field is a Recipient Dimension (Gender) and is found on the Drug Extract. Therefore, any change to SEX values or descriptions needs to be reflected in the Panorama View Catalog.

Drug Claims

Output Field: SEX   Sex

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	8/11/1999	L Richardson	5	1247	Change to always tag from Elig unless a NEWBORN change FOLOG 18 to call when Elig-Match is found but SEX is missing.
	1/20/1999	C.Swanson	4	1203	Updated FOLOG call, added operation # and displayed field
	1/4/1999	J. Dittman	4	739	Added impact to PV.
	6/1/1998	L. Macklem	3	739	Rewrote as functional spec.
	1/9/1998	L. Richardson	2	658	Do NOT tag from Eligibility when NEWBORN = Y.
	12/4/1997	L. Richardson	2	523	Tag SEX from Eligibility if F35-BENE-SEX is invalid.

Drug Claims

Output Field: SINGLES   Single Src

Definition: Identifies the product as a trademarked, patent-protected drug generally available from only one source, although it includes cross-licensed brand name drugs.

DB2 Name: SINGLE_SRC_IND   **Type:** Medi-Cal Custom Field   **Missing Value:** Spaces

Data Type: CHARACTER   **Display Length:** 1   **Storage Length:** 1

Input Fields:

Logic: Drug Convert Logic:

Sets SINGLES = space.

DataScan Core Logic:

SINGLES is tagged from SINGLES in the Redbook File when the NDC is found. SINGLES is set to 'Y' for Single Source drugs based on the data found in the Redbook. If the NDC is not found in Redbook, or the drug is not a Single Source Drug, then it will remain space.

FOLOG Calls:

Default: Space

Precedents: None

Impact:

Tech. Notes:

Revisions:

Date	Author(s)	Phase	IR(s)	Description
10/5/1999	G Holliday	5	1474	Modified Short and Long Desc. fields to match EGAD.
8/4/1999	L. Richardson	5	823	Added as a new field to the Drug Table.

Drug Claims

Output Field: **SKEYDOSE**	Sm Key5-DOSE

Definition: The First Data Bank Smart Key - Dosage Form.

DB2 Name:	SKEY_DOSE	**Type:**	Medi-Cal Custom Field	**Missing Value**	Spaces
Data Type:	CHARACTER	**Display Length:** 3		**Storage Length:**	3

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-SMART-KEY	X	24

Logic: When F35-SMART-KEY (bytes 16-18) <> spaces or low-values
Set SKEYDOSE = F35-SMART-KEY (16-18).

When F35-SMART-KEY (bytes 16-18) = spaces or low-values
Set SKEYDOSE = space.

FOLOG Calls: OPR-#29: When F35-SMART-KEY (bytes 16-18) are equal to spaces or low-values (call FOLOG with F35-SMART-KEY)

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/24/1999	L. Richardson	4	1203	Convert to functional spec.
	1/20/1999	C.Swanson	4	1203	Updated FOLOG call, added operation # and displayed field

Drug Claims

Output Field: **SKEYGTC**	Sm Key1-GTC	

Definition: The First Data Bank Smart Key - Generic Therapeutic Class.

DB2 Name: SKEY_GTC	**Type:** Medi-Cal Custom Field	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 2	**Storage Length:** 2

Input Fields: **Field Name**	**Data Type**	**Length**
F35-SMART-KEY	X	24

Logic: When F35-SMART-KEY (bytes 1 & 2) <> spaces or low-values
Set SKEYGTC = F35-SMART-KEY (bytes 1 & 2)

When F35-SMART-KEY (bytes 1 & 2) = spaces or low-values
Set SKEYGTC = spaces.

FOLOG Calls: OPR-#30: When F35-SMART-KEY (bytes 1 & 2) are equal to spaces or low-values (call FOLOG with F35-SMART-KEY)

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions: **Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
1/24/1999	L. Richardson	4	1203	Convert to functional spec.
1/20/1999	C.Swanson	4	1203	Updated FOLOG call, added operation # and displayed field

Drug Claims

Output Field: SKEYHICL   Sm Key3-HICL

Definition: The First Data Bank Smart Key - Generic Name.

DB2 Name: SKEY_HICL	**Type:** Medi-Cal Custom Field	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 5	**Storage Length:** 5

Input Fields: Field Name	Data Type	Length
F35-SMART-KEY	X	24

Logic: When F35-SMART-KEY (bytes 7-11) <> spaces or low-values
Set SKEYHICL = F35-SMART-KEY (bytes 7-11)

When F35-SMART-KEY (bytes 7-11) = spaces or low-values
Set SKEYHICL = spaces.

FOLOG Calls: OPR-#31: When F35-SMART-KEY (bytes 7-11) are equal to spaces or low-values (call FOLOG with F35-SMART-KEY)

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions: Date	Author(s)	Phase	IR(s)	Description
1/24/1999	L. Richardson	4	1203	Convert to functional spec.
1/20/1999	C.Swanson	4	1203	Updated FOLOG call, added operation # and displayed field

Drug Claims

| Output Field: **SKEYPS** | Sm Key7-PS | | |

Definition: The First Data Bank Smart Key - Package Size.

DB2 Name: SKEY_PS	**Type:** Medi-Cal Custom Field	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 3	**Storage Length:** 3

Input Fields: Field Name	Data Type	Length
F35-SMART-KEY	X	24

Logic: When F35-SMART-KEY (bytes 21-23) <> spaces or low-values
Set SKEYPS = F35-SMART-KEY (bytes 21-23)

When F35-SMART-KEY (bytes 21-23) = spaces or low-values
Set SKEYPS = spaces.

FOLOG Calls: OPR-#32: When F35-SMART-KEY (bytes 21-23) are equal to spaces or low-values (call FOLOG with F35-SMART-KEY)

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	1/24/1999	L. Richardson	4	1203	Convert to functional spec.
	1/20/1999	C.Swanson	4	1203	Updated FOLOG call, added operation # and displayed field

Proprietary and Confidential

Drug Claims

Output Field: **SKEYRT**	Sm Key6-RT		

Definition: The First Data Bank Smart Key - Route of Administration.

DB2 Name: SKEY_RT	**Type:** Medi-Cal Custom Field	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 2	**Storage Length:** 2

Input Fields: **Field Name**	**Data Type**	**Length**
F35-SMART-KEY	X	24

Logic: When F35-SMART-KEY (bytes 19 & 20) <> spaces or low-values
  Set SKEYRT = F35-SMART-KEY (bytes 19 & 20)

When F35-SMART-KEY (bytes 19 & 20) = spaces or low-values
  Set SKEYRT = spaces.

FOLOG Calls: OPR-#33: When F35-SMART-KEY (bytes 19 & 20) are equal to spaces or low-values (call FOLOG with F35-SMART-KEY)

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions: **Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
1/24/1999	L. Richardson	4	1203	Convert to functional spec.
1/20/1999	C.Swanson	4	1203	Updated FOLOG call, added operation # and displayed field

Drug Claims

Output Field: **SKEYSTC**	Sm Key2-STC

Definition: The First Data Bank Smart Key - Specific Therapeutic Class.

DB2 Name: SKEY_STC	Type: Medi-Cal Custom Field	Missing Value: Spaces
Data Type: CHARACTER	Display Length: 4	Storage Length: 4

Input Fields:	Field Name	Data Type	Length
	F35-SMART-KEY	X	24

Logic: When F35-SMART-KEY (bytes 3-6) <> spaces or low-values
Set SKEYSTC = F35-SMART-KEY (bytes 3-6)

When F35-SMART-KEY (bytes 3-6) = spaces or low-values
Set SKEYSTC = spaces.

FOLOG Calls: OPR-#34: When F35-SMART-KEY (bytes 3-6) are equal to spaces or low-values (call FOLOG with F35-SMART-KEY)

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	1/24/1999	L. Richardson	4	1203	Converted to functional spec.
	1/20/1999	C.Swanson	4	1203	Updated FOLOG call, added operation # and displayed field

Drug Claims

Output Field:	**SKEYSTR**	Sm Key4-STR		

Definition: The First Data Bank Smart Key - Drug Strength.

DB2 Name: SKEY_STR	**Type:** Medi-Cal Custom Field	**Missing Value:** Spaces
Data Type: CHARACTER	**Display Length:** 4	**Storage Length:** 4

Input Fields:	Field Name	Data Type	Length
	F35-SMART-KEY	X	24

Logic: When F35-SMART-KEY (bytes 12-15) <> spaces or low-values
        Set SKEYSTR = F35-SMART-KEY (bytes 12-15)

When F35-SMART-KEY (bytes 12-15) = spaces or low-values
        Set SKEYSTR = spaces.

FOLOG Calls: OPR-#41: When F35-SMART-KEY (bytes 12-15) are equal to spaces or low-values (call FOLOG with F35-SMART-KEY)

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	1/24/1999	L. Richardson	4	1203	Convert to functional spec.
	1/20/1999	C.Swanson	4	1203	Updated FOLOG call, added operation # and displayed field

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Drug Claims

Output Field: SKEYUDUU   Sm Key8-UDUU

Definition: The First Data Bank Smart Key - Unit Dose / Unit of Use.

DB2 Name: SKEY_UDUU   **Type:** Medi-Cal Custom Field   **Missing Value:** Spaces

Data Type: CHARACTER   **Display Length:** 1   **Storage Length:** 1

Input Fields:	**Field Name**	**Data Type**	**Length**
	F35-SMART-KEY	X	24

Logic: When F35-SMART-KEY (byte 24) <> spaces or low-values
    Set SKEYUDUU = F35-SMART-KEY (byte 24)

When F35-SMART-KEY (byte 24) = spaces or low-values
    Set SKEYUDUU = spaces.

FOLOG Calls: OPR-#36: When F35-SMART-KEY (byte 24) are equal to spaces or low-values (call FOLOG with F35-SMART-KEY)

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/24/1999	L. Richardson	4	1203	Converted to functional spec.
	1/20/1999	C.Swanson	4	1203	Updated FOLOG call, added operation # and displayed field

Drug Claims

Output Field:	**SSNMEDS**	SSN or MEDS

Definition: SSN or MEDS ID, found in the MEDs File. May also contain a psuedo SSN (first digit is either 8 or 9 and the last digit is a 'P'). This field is hidden to non-secure users.

DB2 Name:	SSN_OR_MEDS_ID	**Type:**	Medi-Cal Custom Field	**Missing Value:**	Spaces
Data Type:	CHARACTER	**Display Length:**	9	**Storage Length:**	9

Input Fields:

Field Name	Data Type	Length
F35-CIN	X	9
MBR-EMPID	X	9
MBR-ENROLLDT	DATE	4
MBR-SSNMEDS	X	9
SVCDATE	DATE	4

Logic: Tag from Eligibility or set to missing.

Look up SSNMEDS (tag from) the Eligibility Table, matching on *both*:

    F35-CIN = MBR-EMPID
    SVCDATE = MBR-ENROLLDT (match on year and month only)

When a match is found, set SSNMEDS = MBR-SSNMEDS.

If no Elig-Match is found, set SSNMEDS = spaces (missing).

NOTE: This field is hidden to non-secure MIS/DSS users.

FOLOG Calls: OPR-#43: When F35-SSN-OR-MEDS-ID is equal to spaces, zeroes, 9's or low-values and MBR-SSNMEDS are not equal to zeroes, spaces, 9's or low-values (call FOLOG with F35-SSN-OR-MEDS-ID) - ****Remove this FOLOG call since F35-SSN-OR-MEDS-ID is no longer used in the logic - 8/13/99 (LDR)

Default: Spaces (default value). This is assigned when no Elig-Match is found.

Precedents: SVCDATE

Impact:

Tech. Notes:

Revisions:

Date	Author(s)	Phase	IR(s)	Description
11/20/2000	C.Swanson	6	1921	Added note that this field is hidden
8/13/1999	L. Richardson	5	1247	Changed logic to only tag from Elig or set to missing. Remove FOLOG call OPR# 43.
1/20/1999	C.Swanson	4	1203	Updated FOLOG call, added operation # and displayed field
12/28/1998	L. Richardson	4	1203	Corrected functional spec logic for validation of F35-SSNMEDS field.
6/8/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field: **SUBCHG**	Submit Chg	

Definition: Contains the submitted or billed charge for this service.

DB2 Name: SUBMIT_CHG	**Type:** DataScan Core Field	**Missing Value**: None
Data Type: DECIMAL	**Display Length:** 9, 2	**Storage Length:** 5

Input Fields: **Field Name**	**Data Type**	**Length**
F35-DET-MEDI-CAL-AMOUNT-BILLED	S9(7)V9(2)	9

Logic: SUBCHG = F35-DET-MEDI-CAL-AMOUNT-BILLED (if numeric)

If F35-DET-MEDI-CAL-AMOUNT-BILLED not numeric, set SUBCHG = 0 (zero).

Note: SUBCHG is identical to CHG. It is hidden from users in the DataScan application.

FOLOG Calls: OPR-#15: When F35-DET-MEDICAL-AMOUNT-BILLED is not numeric (call FOLOG with F35-DET-MEDICAL-AMOUNT-BILLED)

Default: Zero (missing value). This is assigned when the input field is non-numeric.

Precedents: None

Impact:

Tech. Notes:

Revisions: **Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
1/20/1999	C.Swanson	4	1203	Updated FOLOG call, added operation # and displayed field
12/28/1998	L. Richardson	4	1203	Removed 'low values' from the default logic.
6/1/1998	L. Macklem	3	739	Rewrote as functional spec.
12/4/1997	L. Richardson	2	553	Removed the logic assigning SUBCHG = 0 for capitated services.

Drug Claims

Output Field: SVCCAT   Service Cat

Definition: The category of service values used by the MIS solution, Panorama View.

DB2 Name: SVC_CAT   **Type:** Medi-Cal Custom Field   **Missing Value:** Zero

Data Type: SMALLINT   **Display Length:** 5   **Storage Length:** 2

Input Fields:

Field Name	Data Type	Length
AGE	DECIMAL	3
DRUGCODE	X	7
F35-ACCOMMODATION-CODE	X	2
F35-CLAIM-TYPE	X	1
F35-FAMILY-PLANNING-IND	X	1
F35-FI-PROVIDER-TYPE	X	3
F35-MEDICAL-SUPPLY-IND	X	1
F35-PROCEDURE-AREA	X	40
F35-PROVIDER-NUMBER	X	9
F35-PROVIDER-TYPE	X	2
F35-SMART-KEY-GTC	X	2
NDC	DECIMAL	11
PROC1	X	5
SVCTYP	SMALLINT	5
VENDORCD	X	2

Logic: The intention is to set this field with the rules used on HCFA 2082 category of service reports. The logic is essentially driven by VENDORCD, but often this field alone is not sufficient to assign SVCCAT, so other criteria are added.

See Attachment: SVCCAT for the detailed logic.

FOLOG Calls: OPR-#45: When SVCCAT(Service Category) is equal to '00' (Call FOLOG with VENDORCD).

Default: 19 - Other Services - There should never be a missing value. All services will default to 19 if no other assignment can be made.

Precedents: AGE
DRUGCODE
NDC
PROC1
SVCTYP
VENDORCD

Impact: SVCCAT is a Panorama View dimension field and is used in the MIS/DSS to provide information consistent with the HCFA 2082 used by the Medi-Cal program. The same rules used to assign HCFA 2082 Category of Service assignments are used in determining the SVCCAT value for the MIS/DSS. Any change to SVCCAT values or descriptions will need to be reflected in the Panorama View Catalog.

Tech. Notes: Beginning in Phase 4 we will use a single sub-program that is used by both the Claim and Drug convert Program.

Revisions:

Date	Author(s)	Phase	IR(s)	Description
5/8/2002	C.Swanson	6	2811	Changed input field lenth of procedure area to 40
8/6/1999	L Richardson	5	1237	Change length for input field f35-FI-Provider-Type to 3, and changed logic to look for '008' instead of '08'.

Drug Claims

Output Field:	SVCCAT	Service Cat			
	1/20/1999	C.Swanson	4	1203	Updated FOLOG call, added operation # and displayed field
	1/9/1999	L Richardson	4	1165	Technical Note about single sub routine for SVCCAT.
	1/5/1999	J. Dittman	4	739	Updated impact to PV.
	12/8/1998	K. Key	4	N/A	In order to match the EGAD table, modified the missing rule be zero instead of none.
	7/28/1998	L Richardson	3	1026	Revisions requested as a result of the Phase 3 System Design Deliverable
	6/8/1998	L Richardson	3	720	Minor modifications to bring the spec in line with the HCFA 2082 reporting rules Minor modifications to bring the spec in line with the HCFA 2082 reporting rules
	5/29/1998	L. Macklem	3	739 720	Rewrote as functional spec. Revised logic per letter MIS/DSS 034-0198 of 1/26/98.
	1/9/1998	J. Dittman J. Dittman	2	515	Removed the logic excluding OBRA aliens (AIDCODE 55) f SVCCATs 02, 05, 07 and 62 per Bonnie Williams.
	12/16/1997	J. Dittman	2	515	Revised specs to more closely match Federal Type of Servic Categories provided by Bonnie Williams.

Drug Claims

Output Field:	**SVCDATE**	Service Date

Definition: The first date of service for this record (CCYY-MM-DD format).

DB2 Name: SVC_DT	**Type:** DataScan Core Field	**Missing Value**: 0001-01-01
Data Type: DATE	**Display Length:** 10	**Storage Length:** 4

Input Fields:

Field Name	Data Type	Length
F35-DET-FROM-DATE-OF-SERVICE	S9	8
F35CLAIM-TYPE	X	1
F35-HDR-FROM-DATE-OF-SERVICE	S9	8
F35-PLAN-CODE	X	2

Logic: This logic assigns:

    SVCDATE
    SVCDTMM
    SVCDTYY

The Splitter program has already dropped records with an invalid service date.

Validate and use the detail-level service date (F35-DET-FROM-DATE-OF-SERVICE) , when *either* of the following is true:

1. F35-PLAN-CODE = any valid code other than 02 (GMC). Valid plan codes are 00 - 09.
2. *Both* the following are true:
   F35-PLAN-CODE = 02 (GMC)
   F35-CLAIM-TYPE <> 3 or 4 (i.e., not Drug or Medical).

Validate and use the header-level service date (F35-HDR-FROM-DATE-OF-SERVICE), when *either* of the following is true:

1. F35-PLAN-CODE is not a valid value
2. *Both* the following are true:
   F35-PLAN-CODE = 02
   F35-CLAIM-TYPE = 3 or 4.

If the appropriate input service date (detail or header) is an invalid, use the RUNDATE at the time the programs are being run. RUNDATE is a parameter defined as the first day of the last month in the 30-month database window.

SVCDTMM = month portion (1 - 12) of SVCDATE.
SVCDTYY = year portion (CCYY) of SVCDATE.

FOLOG Calls: None

Default: None. If SVCDATE would be invalid, the record is dropped by the Splitter program.

Precedents: None

Impact: SVCDATE is a critical field, as it defines the 'Date of Service' view of the data. This field is extracted to Panorama View.

Tech. Notes:

Revisions:

Date	Author(s)	Phase	IR(s)	Description

Drug Claims

Output Field: SVCDATE   Service Date

6/3/2002	C.Swanson	6	2811	Corrected input field name - removed DHS from F35-CLAIM TYPE
5/9/2002	C.Swanson	6	2811	Changed input field length of plan code to 2
8/6/1999	L. Richardson	5	1237	Changed the input lenghts to 8, removed logic that set the century to '19', and removed 'non Y2K' compliant references
6/14/1999	L. Richardson	4	1320	Change 'incurred' to 'Date of Service' in the impact statement
1/24/1999	L. Richardson	4	1203	Made consistent with Claims changes applied in IR 1162.
1/10/1999	J. Dittman	4	739	Updated impact to PV.
1/7/1999	T. Poyner	4	1210	Changed date format from YYYYMMDD to CCYYMMDD description and logic.
9/22/1998	L Richardson	3	895	Added SVCDTYY and SVCDTMM to the spec
6/1/1998	L. Macklem	3	739	Rewrote as functional spec.

Drug Claims

Output Field: **SVCDTMM**	Svc Month	

Definition:	The month of service (MM format).			
DB2 Name:	SVC_DT_MM	**Type:** DataScan Core Field	**Missing Value**: Zero
Data Type:	SMALLINT	**Display Length:** 5	**Storage Length:** 2

Input Fields:

Logic:	See SVCDATE.
FOLOG Calls:	None
Default:	
Precedents:	None
Impact:	
Tech. Notes:	

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	9/22/1998	L Richardson	3	895	Added this field per the IR to be consistent with the Claims Table,

Drug Claims

Output Field: **SVCDTYY**	Svc Year

Definition:	The year of service (CCYY format).

DB2 Name: SVC_DT_YYYY	**Type:** DataScan Core Field	**Missing Value:** Zero
Data Type: SMALLINT	**Display Length:** 5	**Storage Length:** 2

Input Fields:

Logic: See SVCDATE.

FOLOG Calls: None

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	1/7/1999	T. Poyner	4	1210	Changed date format from YYYYMMDD to CCYYMMDD description.
	9/22/1998	L Richardson	3	895	Added this field per the IR to be consistent with the Claims Table.

Drug Claims

Output Field:	**SVCTYP**	Service Type

Definition:	The MEDSTAT Group's standard type of service, based on the procedure code or revenue code on the claim or encounter.

DB2 Name: SVC_TYP	**Type:** Medi-Cal Custom Field	**Missing Value:** Zero
Data Type: SMALLINT	**Display Length:** 5	**Storage Length:** 2

Input Fields:

Logic:	See NDC.
FOLOG Calls:	None
Default:	Zero (missing value)
Precedents:	None
Impact:	
Tech. Notes:	

Revisions:

Drug Claims

Output Field:	**TAPEDT**	Tape Date

Definition: The submitted tape date. The year and month represents the data tape on which this claim or encounter was submitted (CCYYMMDD format).

DB2 Name: TAPE_DT	**Type:** Medi-Cal Custom Field	**Missing Value:** 0001-01-01
Data Type: DATE	**Display Length:** 10	**Storage Length:** 4

Input Fields:	**Field Name**	**Data Type**	**Length**
	N/A	N/A	N/A

Logic: TAPEDT is set by a run JCL control card parameter called the 'Run Date'. This parameter is the first day of the last month in the database's 30-month window.

Example: Assume a database install covering paid data for Jan 95 through June 97. The 'Run Date' (in CCYYMMDD format) will be 19970601. TAPEDT for all this data will be 1997-06-01. Now, we do a monthly update for July 97 paid data. For this update data only, the 'Run Date' will be 19970701, and TAPEDT will be 1997-07-01, regardless of paid dates reported on the input file.

FOLOG Calls: None

Default: None

Precedents: None

Impact: TAPEDT is useful for troubleshooting of monthly updates.

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/24/1999	L. Richardson	4	1203	Added 'Run Date' references.
	1/7/1999	T. Poyner	4	1210	Changed date format from CCCCMMDD in description and YYYYMMDD in logic to CCYYMMDD.
	12/8/1998	K. Key	4	N/A	In order to match the EGAD table, modified the missing rule be 0001-01-01 instead of none.
	6/9/1998	L Richardson	3	1001	Changed the format of the field from mmyy to cccc-mm-dd
	5/14/1998	L. Macklem	3	739	Rewrote as functional spec, stating how TAPEDT is set.

Drug Claims

Output Field:	**TARIND**	Tar Ind

Definition: Identifies if a Treatment Authorization Request (TAR) was indicated.

DB2 Name:	TAR_IND	Type:	Medi-Cal Custom Field	Missing Value:	Spaces
Data Type:	CHARACTER	Display Length:	1	Storage Length:	1

Input Fields:	**Field Name**	**Data Type**	**Length**
	TARNUM	CHARACTER	11

Logic: When TARNUM populated (not spaces and not all zeroes)
Set TARIND = 1

FOLOG Calls: None

Default:

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	3/13/2003	J. Abbott	6	3144	Modify logic slightly such that when TARNUM not spaces a not all zeroes, then TARIND = 1.
	5/6/2002	C.Swanson	6	2811	Changed logic to use new TARNUM field. Old logic saved in the 'Issues' section.
	1/24/1999	L. Richardson	4	1203	Convert to functional spec.

Drug Claims

Output Field:	**TARNUM**	TAR Number

Definition: Identifies the Treatment Authorization Control number assigned to pre-authorize the service.

DB2 Name: TAR_NUM	**Type:** Medi-Cal Custom Field	**Missing Value**: Spaces
Data Type: CHARACTER	**Display Length:** 11	**Storage Length:** 11

Input Fields:	**Field Name**		**Data Type**	**Length**
	F35-TAR-CONTROL-NUMBER		CHARACTER	11

Logic: If F35-TAR-CONTROL-NUMBER is spaces or low values or all zeroes, set TARNUM to all spaces (missing).
Otherwise set to F35-TAR-CONTROL-NUMBER.

NOTE: If data is submitted in the old format (pre-SDN 6043) after April 2002 and TARIND is set to YES but the actual TAR number is not available in the old format, ITSD will populate the F35-TAR-CONTROL-NUMBER with one of the following values so that TARNUM can still be set:

    All spaces
    'Y   '   ('Y' followed by 10 spaces)
    'E   '   ('E' followed by 10 spaces)
    'A   '   ('A' followed by 10 spaces)
    'I   '   ('I' followed by 10 spaces)

FOLOG Calls:

Default: Space

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	5/10/2003	J. Abbott	6	3144	Correct specs for missing value
	4/4/2003	J. Abbott	6	3144	Change missing value from zeroes to spaces.
	4/3/2003	J. Abbott	6	3144	Update info about specific values that may be sent in the old format.
	3/13/2003	J. Abbott	6	3144	Change "missing" value from spaces to zeroes; add informati about value '00000000002'.
	5/9/2002	C.Swanson	6	2811	Created field

Drug Claims

Output Field:	**TG**		Treat Grp		

Definition: A value assigned by The MEDSTAT Group identifying outpatient services by medical condition, based on diagnosis. TG is set to 0 (zero) on Drug Claims.

DB2 Name: TREATMENT_GRP	**Type:** DataScan Core Field	**Missing Value:** Zero
Data Type: SMALLINT	**Display Length:** 5	**Storage Length:** 2

Input Fields:	**Field Name**	**Data Type**	**Length**
	N/A	N/A	N/A

Logic: Drug Convert Logic:

Sets TG to 0 (zero). On the Drug table the value remains zero, no further TG assignments can be made as there are no valid PATTERNs on the Drug Table for the Medi-Cal DSS.

FOLOG Calls: None

Default: 0 (zero)

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	1/24/1999	L. Richardson	4	1203	Converted to functional spec.
	12/8/1998	K. Key	4	N/A	In order to match the EGAD table, modified the missing rule be zero instead of none.
	11/16/1998	K. Key	4	1162	Updated default value to be zero and missing value to be non

Drug Claims

Output Field:	**THERCLS**	Ther Class

Definition: A broad, general classification used to characterize drug products. The values correspond to the first two digits of the Generic ID.

DB2 Name: THER_CLASS	**Type:** Medi-Cal Custom Field	**Missing Value:** Zero
Data Type: DECIMAL	**Display Length:** 3, 0	**Storage Length:** 2

Input Fields:	**Field Name**	**Data Type**	**Length**
	N/A	N/A	N/A

Logic: Drug Convert Logic:

Sets THERCLS to 0 (zero).

DATASCAN CORE Logic:

Sets THERCLS to the Therapy Class from the RedbookFile when the NDC is found.
If the NDC is not found the THERCLS remains set to 0 (zero).

FOLOG Calls: None

Default: Zero

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	10/5/1999	G Holliday	5	1474	Modified Short and Long Desc. fields to match EGAD.
	8/4/1999	L. Richardson	5	823	Changed MediSpan reference to Redbook and changed the length from 2 to 3.
	1/23/1999	L. Richardson	4	1203	Converted to functional spec and added default.

Drug Claims

Output Field: THERCODE   Ther Cls Cd

Definition: Based on the American Hospital Formulary Service Classification Compilation (AHFSCC) Therapeutic Class, a 10-digit hierarchical code that categorizes drugs down to the generic ingredient level.

DB2 Name: THER_CLASS_CODE   **Type:** Medi-Cal Custom Field   **Missing Value:** Zero

Data Type: DECIMAL   **Display Length:** 10, 0   **Storage Length:** 6

Input Fields:

Logic: Drug Convert Logic:

Sets THERCODE = zero.

DataScan Core Logic:

THERCODE is tagged from the THERCODE from the Redbook File when the NDC is found. If the NDC is not found THERCODE remains zero (for missing).

FOLOG Calls:

Default: Zero

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	10/5/1999	G Holliday	5	1474	Modified Short and Long Desc. fields to match EGAD.
	8/6/1999	L. Richardson	5	823	Added new field to the Drug Table.

Drug Claims

Output Field:	**THERGRP**	Ther Group			

Definition: Groupings of therapeutic class values.

DB2 Name: THER_GROUP	**Type:** Medi-Cal Custom Field	**Missing Value:** Zero
Data Type: DECIMAL	**Display Length:** 2, 0	**Storage Length:** 2

Input Fields:	**Field Name**	**Data Type**	**Length**
	N/A	N/A	N/A

Logic: Drug Convert Logic:

Sets THERGRP to 0 (zero).

DATASCAN CORE Logic:

Sets THERGRP to the Therapy Group from the Redbook File when the NDC is found.
If the NDC is not found the THERGRP remains set to 0 (zero).

FOLOG Calls: None

Default: Zero

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	8/4/1999	L. Richardson	5	823	Changed MediSpan reference to Redbook.
	1/23/1999	L. Richardson	4	1203	Converted to functional spec and added default.

Drug Claims

Output Field: TOPRX   Top Presc

Definition: A code depicting the velocity ranking of a product based on annual volume of prescriptions for each product.

DB2 Name: TOP_RX   **Type:** Medi-Cal Custom Field   **Missing Value:** Zero

Data Type: DECIMAL   **Display Length:** 1, 0   **Storage Length:** 1

Input Fields:	Field Name	Data Type	Length
	N/A	N/A	N/A

Logic: Drug Convert Logic:

Sets TOPRX to 0 (zero).

DATASCAN CORE Logic:

Sets TOPRX to the Top Drug (by prescription volume) from the Redbook File when the NDC is found.

The valid values include:
1. 1st 100 drugs
2. 2nd 100 drugs
3. 3rd 100 drugs
4. 4th 100 drugs
5. 5th 100 drugs
6. Other / Unavailable

If the NDC is not found in the Redbook File, the TOPRX remains set to 0 (zero).

FOLOG Calls: None

Default: Zero

Precedents: None

Impact:

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	8/4/1999	L. Richardson	5	823	Changed MediSpan reference to Redbook.
	1/23/1999	L. Richardson	4	1203	Converted to functional spec and added default

Drug Claims

Output Field: **TOPVOL**	Top Vol Rank	

Definition: A Product's actual ranking based on unit sales volume, as determined by syndicated market research studies. Products outside the Top Volume category are given a zero ranking.

DB2 Name: TOP_VOL_RANK	**Type:** Medi-Cal Custom Field	**Missing Value:** Zero
Data Type: SMALLINT	**Display Length:** 3	**Storage Length:** 2

Input Fields:

Logic: Drug Convert Logic:

Sets TOPVOL = Zero.

DataScan Core Logic:

TOPVOL is tagged from TOPVOL in Redbook when the NDC is found. In the NDC is not found or the NDC is outside the Top Volume category it remains zero.

FOLOG Calls:

Default: Zero

Precedents: None

Impact:

Tech. Notes:

Revisions:

Date	Author(s)	Phase	IR(s)	Description
10/5/1999	G Holliday	5	1474	Modified Short and Long Desc. fields to match EGAD.
8/4/1999	L. Richardson	5	823	Added new field on the Drug Table.

Drug Claims

Output Field:	**UNITPRC**	Unit Price

Definition: The average wholesale price (AWP) charged by wholesalers per unit of product.

DB2 Name: AWP_UNIT_PRICE	**Type:** Medi-Cal Custom Field	**Missing Value:** None
Data Type: DECIMAL	**Display Length:** 9, 5	**Storage Length:** 5

Input Fields:

Logic: Drug Convert Logic:

Sets UNITPRC = zero.

DataScan Core Logic:

UNITPRC is tagged from the UNITPRC in the Redbook File when the NDC is found. If the NDC is not found the UNITPRC remains zero.

FOLOG Calls:

Default: Zero

Precedents: None

Impact:

Tech. Notes:

Revisions:	**Date**	**Author(s)**	**Phase**	**IR(s)**	**Description**
	10/5/1999	G Holliday	5	1474	Modified Short and Long Desc. fields to match EGAD.
	8/4/1999	L. Richardson	5	823	Added new field to the Drug Table.

Drug Claims

Output Field:	**VENDORCD**	Vendor Code

Definition: The Medi-Cal Vendor Code representing the Medi-Cal type of provider that rendered the service as reported on the claim or encounter.

DB2 Name:	VENDOR_CD	Type:	Medi-Cal Custom Field	Missing Value:	Spaces
Data Type:	CHARACTER	Display Length:	2	Storage Length:	2

Input Fields:	Field Name	Data Type	Length
	F35-VENDOR-CODE	X	2

Logic: Apply these rules in order:

1. Validate F35-VENDOR-CODE in the VENDORCD map, matching on:

   F35-VENDOR-CODE = VENDORCD Prov Typ Code.

   If F35-VENDOR-CODE validated or = spaces, set VENDORCD = F35-VENDOR-CODE.

2. VENDORCD = 00 when F35-VENDOR-CODE <> spaces but validation fails.

FOLOG Calls: OPR-#53: When F35-VENDOR-CODE does not equal spaces but no match is found on the VENDORCD map of valid values (call FOLOG with F35-VENDOR-CODE)

OPR-#53: When F35-VENDOR-CODE is equal to space (call FOLOG with F35-VENDOR-CODE)

Default: Spaces (missing value). This is assigned if F35-VENDOR-CODE = spaces.

Precedents: None

Impact: VENDORCD is a Panorama View dimension in the Provider cube. Therefore, any change to VENDORCD values or descriptions needs to be reflected in the Panorama View Catalog.

Tech. Notes:

Revisions:	Date	Author(s)	Phase	IR(s)	Description
	1/24/1999	L. Richardson	4	1203	Clarified logic for condition of input = spaces.
	1/20/1999	C.Swanson	4	1203	Updated FOLOG call, added operation # and displayed field
	1/10/1999	J. Dittman	4	739	Updated impact to PV.
	6/8/1998	L. Macklem	3	739	Rewrote as functional spec.
	12/31/1997	J. Dittman	2	545	Added validation.